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ABSTRACT

Presented is a guidebook for school administrators, teachers, and parents on preschool programing for handicapped children. Chapters are included which discuss the following topics: screening procedures (five steps to secure community support); funding for school programs (acquiring funds from federal, state, and private sources); curriculum (model selection, individual child assessment, behavioral objectives, task analysis, curriculum evaluation, and materials selection); preschool program staffing (instructional competencies, certification and licensing, inservice training, staff composition, and staff selection); family programs (five steps to develop effective family program); facilities (facility planning, environmental variables, and architectural barriers); evaluation (defining goals and objectives, planning, data management, documentation, and feedback); and documentation and proposal writing. (SB)

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# Preschool Programs for Handicapped Children

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# Preschool Programs for Handicapped Children

A guidebook for the development and operation of programs

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# Contents

Chapter One

**Introduction** ..... 7

How to Use this Guidebook; A Rationale for Preschool Programs

Chapter Two

**Screening Procedures** ..... 11

Surveying Community Resources; Selecting Screening Instruments; Publicity Campaigns; Determining Program Needs; Continuing Identification

Chapter Three

**Funding for Preschool Programs** ..... 19

Federal Programs: Title VI, Part B, Headstart, Developmental Disabilities, other Federal Sources; State Programs; Private Funds

Chapter Four

**Curriculum** ..... 31

Choosing a Model; Assessing Individual Children; Behavioral Objectives; Task Analysis; Programming; Evaluating Curriculum; Materials Selection

Chapter Five

**Staffing a Preschool Program** ..... 51

Instructional Competencies; Certification and Licensing; Inservice Training; Staff Composition; Selecting Staff

Chapter Six

**Family Programs** ..... 57

Selecting Parent Educators; Scheduling; Selecting Program Formats; Parent Involvement in Preschool Administration; Skill Training for Parents

Chapter Seven

**Facilities** ..... 65

Planning a Facility; Environmental Variables; Architectural Barriers

Chapter Eight

**Evaluation** ..... 73

Determining Goals and Objectives; Planning; Data Management; Documentation; Feedback

Chapter Nine

**Documentation and Proposal Writing** ... 81

Chapter One

# Introduction

This package is designed to help people—school administrators, teachers, parents—who want to help young handicapped children. Because early education for handicapped children is widely accepted as desirable and necessary, and because there are now resources being made available for such programs, it is crucial that educators understand how best to utilize this money and plan viable programs. This information package will not plan your program for you from beginning to end. Rather, it is a guidebook; a set of suggestions for you to incorporate into your own basic concept of what a preschool program for handicapped children should be. As a result of requests from many different sources representing many varied circumstances, and from the realization that nothing quite like it existed, this information package was developed. It was planned that the information contained in it could be used by many, if not all people who were in need of some guidance and assistance.

The term "preschool" or "preschool years" refers to the time in a child's life prior to entering the first grade. Information in this package is not geared to any *specific* age group, though it is probably most applicable to programs for children of about the ages 3-6. Infant stimulation programs are not treated here, nor are homebound programs, though many of the basic strategies outlined in this guidebook, such as community needs assessment and child identification efforts, curriculum planning, and staff selection may be used in planning such programs.

The guidebook will be most useful in developing a total program if it is read from beginning to end. It has been

prepared so that the phases of planning are presented as sequentially as possible. For example, an individualized curriculum cannot be written until the children and their needs have been identified. If a proposal for funding is to be written, the last chapter should prove useful in making sure that all of the important steps have been covered.

**A rationale for early childhood education**

A commonly accepted theory of early childhood development is that ". . . the preschool years are the most important years of learning in the child's life. A tremendous amount of learning takes place during these years; and this learning is the foundation for all further learning." (Jensen, 1963). The importance of the early environment is stressed by Bloom because of the rapidity and ease with which certain characteristics are acquired. While learning is rapid and relatively facile in the early years, it becomes much slower and more difficult with increased age. Thus, Bloom states, an adequate learning environment is crucial, because "it is much easier to learn something new than it is to stamp out one set of learned behaviors and replace them by a new set." This viewpoint has since been substantiated by evidence from many programs for handicapped children. For example, Mrs. Belle Dubnoff, founder of the Dubnoff Center for Child Development and Educational Therapy in North Hollywood, California, has said, ". . . the handicapped child should be identified as early as possible. We used to think of reaching the child by the age of six, now we are convinced that the first two or three years are the most important."

The responsibility for learning and shaping characteristics during this time, then, is placed primarily upon families unless the child receives some outside stimulation. Where handicapped children are concerned, every aspect of training and teaching is more time consuming and puts more strain on the parent and other family members. Families seldom have the time, space, variety of equipment, and educational materials in their homes to adequately stimulate handicapped children. In addition, many parents are not emotionally equipped to care for handicapped children without some support.

Preschools, whether a classroom setting or a home-based program, can serve to relieve at least a portion of the burden placed upon parents, while simultaneously educating parents to better understand and care for their handicapped child. The importance of a parent education program in conjunction with a preschool program for handicapped children is obvious not only because families can learn the special skills necessary to teach and train the child at home, but also because parents need to be given a realistic outlook concerning the future of their child.[3]

Experience in a preschool program which allows children to interact socially with other children of the same or similar age will enhance their ability to enter the educational mainstream. The federal government has determined from early statistics of model programs that many handicapped children participating in preschool are able to function later in a regular classroom with special education support. Early education assures early identification and often early remediation of handicaps which are not immediately recognizable. It also stimulates recognition of secondary or subsidiary handicaps. Preschools, from the point of view of educators, can actually be considered a good investment. While immediate results may or may not be spectacular, indications are such that "subsequent remedial, counseling and even penal and welfare costs" will be reduced.

It is our opinion that preschools should be available for all children in the future. Preschools for handicapped children are even more important, for ". . . children with disabilities no less, and probably more, than children without disabilities need specialized assistance from the earliest age" (Reger, 1970). If preschools can prepare children, particularly handicapped children, to better meet the social and emotional demands which will eventually be placed upon them, and in providing them with such "survival skills," facilitate later learning, they will fulfill a vital function.

Chapter Two

# Screening Procedures

**Initial planning steps may prove to be the most important in securing community support**

Preparing to open a preschool for handicapped children means identifying the existing need in the community for a program, and then locating the children who could benefit from the program. The process of organizing an identification and needs assessment effort will involve a special sensitivity to the consciousness of the population in question and a familiarity with and responsiveness to the social and emotional needs of that group. While other areas of planning—curriculum, facilities, parent involvement—require innovative thinking, the planners will have numerous guides to follow and use as points of departure. In the area of needs assessment, however, administrators or future administrators of a preschool for handicapped children most probably will discover that they are not able to use the same procedures with their specific population as those employed to conduct a needs assessment in some other area. Strategies employed are subject to such factors as availability of existing agencies for resources, population of target area, density or sparseness of that population, and so on.

The identification of potentially "high risk"—that is potentially handicapped or learning disabled—children will be time consuming but need not be a costly procedure. There are many, many inexpensive resources available in most communities. These, of course, have to be sought out, but it is worth the effort in terms of insuring accuracy and saving money. The first requirement, then, for administrators of early childhood programs for handicapped children, is that they be willing to invest time, originality, and expertise in dealing with the public in order to assure

that a complete and proper needs assessment will be conducted.

**Five steps**

To facilitate planning for a needs assessment, five basic steps in the identification effort have been pinpointed:

1. Survey agencies in the community which serve handicapped children to determine what programs are already available and how many children are being served by them.
2. Find a suitable screening instrument (or develop one) to identify potential "high risk" children within the region which the preschool will serve. This instrument should be geared to the age group to be screened. In order for identification to be most effective, it should reach the greatest number of children at the earliest age.
3. Launch a publicity campaign to solicit referrals. Here again, sensitivity to the population involved is important. Choice of media and phrasing of announcements are factors which must be given careful thought.
4. Determine from the results of the screening effort the distribution of handicaps and the corresponding curriculum needs. From this information, determine which needs can be met by existing agencies or programs, and which might be served by the facility you are planning.
5. Incorporate into the identification effort some means of insuring that the region surveyed is reassessed regularly. This type of effort should eventually lead to "assessment for prevention" rather than "remedial intervention."

### 1. Survey agencies

We cannot overemphasize the importance of coordinating efforts with agencies in the community which are committed to helping handicapped children. Obtain a complete list of agencies, if available, from the coordinator of special services in the local school district, or from the the county human resources agencies.

**Locate resources in the community ... then use them**

Approach each one with information about the screening effort, together with a simple form which will delineate their services and how many children of preschool age they are presently serving. This initial action will put you in touch immediately with people who should know just what is being done in the community for young handicapped children. These people should also be able to inform you as to whether an identification campaign or a community needs assessment has been conducted recently. If so, much of the work will already be done.

Direct contact with these people will avoid duplication of efforts and may locate sources of help when it is needed. For example, some pediatricians in the area might be willing to give an hour or two of their time to assist with

the medical portion of the assessment. Public Health Nurses are an invaluable resource. They can provide referrals and aid in medical assessment and most of them are also trained to administer the Denver Developmental Scale or similar instruments. Additionally, most states have County or Regional Mental Health Centers, other service coordinating agencies, or personnel such as Developmental Disabilities Service Coordinators who can help with the identification process. In short, a potential program can only be helped by seeking and using as much assistance as is available from sources in your community. Keep in touch with these people after the program is under way, too. No program should be run in isolation.

### 2. Finding a suitable screening instrument

**Determine areas to be tested, then choose or write an appropriate screening instrument**

Before choosing an instrument or preparing an original one, priorities should be established among the criteria considered important for an adequate test. Obviously, one instrument will not answer every need, but prioritizing criteria will aid in the selection or development of a test which will produce the greatest amount of desirable data. A partial list of questions which will need to be answered individually is included here. Please remember that this list is not complete—the criteria must be customized to the special needs of a given population.

What age group is to be screened? birth to 7 years? 2½ to 5½ years?

Who should the administrators of the test be? professionals, paraprofessionals, trained psychologists?

How many children are to be tested at one time—individual children, small groups?

Will the parents of the child be involved in the screening?

Should the test screen for any or all of the following areas of development:
Speech and language
Social/Affective
Motor Coordination
Conceptual Ability
Self-Help Skills

Should test scores reflect any or all of the following:
Special education categories
Age or sex differences
Potential learning problems

Should the test be normed by age and sex?

Will care be taken to assure that the test is not threatening to the child or parent?

Should the tests be objectively scored only, or will some subjective judgments be included?

Will test allow for both motoric and verbal responses?

Will vision and hearing tests be part of the entire screening?

Project DIAL (Developmental Indicators for the Assessment of Learning) has developed a screening inventory for the State of Illinois. Their report on the process of writing the instrument, which also includes the instrument itself, is available without cost. Write:

**Office of the Superintendent of Public Instruction**
**State of Illinois**
**Springfield, Illinois**

and ask for: "Learning Disabilities/Early Childhood Research Project: Developmental Indicators for the Assessment of Learning." Several other recommended screening instruments include:

*Daberon: a screening device for school readiness*, by Virginia Danzer, Mary Berger, and Theresa Lyons. Daberon Research, 1972.

*Denver Developmental Screening Test*, 1968, Frankenburg, W. K., and Dodds, J. B., Ladoca Project and Publishing Foundation Inc., East 51st Ave., and Lincoln, Denver, Colorado 80216.

*Kindergarten Evaluation of Learning Potential (KELP)*, by Mildred Robeck and John Wilson. Webster Division, McGraw-Hill, 1969.

*Modified Utah Screening Inventory*, Regional Resource Center for Handicapped Children, Clinical Services Building, University of Oregon, Eugene, Oregon 97403.

**The rights of children and their parents must be protected**

When the screening instrument(s) most suitable for the identified needs have been chosen, test administrators will have to be found and a location for the screening specified. At this stage, an important measure not to be overlooked is assuring the basic rights of children. Parents should be asked to fill out Parent Consent and Parent Release forms before any testing, diagnosis, program placement, or program change takes place. They should be guaranteed the strictest confidentiality regarding test results unless they have signed a release specifically stating to whom the information will be given. These measures are not just a courtesy to the parent and child; there are laws in almost every state which require that such rights be safeguarded.

### 3. Public Relations effort

**Publicize thoroughly and carefully**

Publicity information about the program and the identification process for which participants are being sought should be positive in tone and content. Stress the importance of early intervention, and the fact that research has shown that most handicapped children can be helped by preschool programming. It is important for parents of handicapped children to know that they are not alone in the world. The subleties of many handicapping conditions need to be stressed so that parents of seemingly normal children will have them screened. Attempt to be encouraging and at the same time accurate. Do not, for example, intimate that all children who receive help at an early age will be able to enter regular classes in first grade. On the other hand, do not discourage referrals by using negative or stigmatizing language.

Agencies which serve the handicapped can be useful in the public relations effort. Keep them constantly informed of recent developments so that they can make helpful suggestions and feel a part of the entire endeavor.

A booklet which may give useful ideas about presenting the facts to parents of handicapped children and encouraging their participation in a screening is: *If you have a handicapped child . . . you are not alone*. This booklet is printed by the Bureau of Education for the Handicapped, U.S. Office of Education, 7th and D Streets, Washington, D.C. 20202, and presents in a concise manner the responsibility which educators and parents have of assuring that children reach their full potential as human beings.

**Investigate all possible sources of free publicity**

The most common and inexpensive method of releasing the information about screening is through public service spot announcements on radio and television. Most local stations will have their own announcers read written announcements turned in to them. The time is free because radio and tv stations are obligated to devote a certain amount of advertising time each day to public service announcements. Because radio and tv stations use announcements of specific lengths, "spots" should be written which are 10, 15, 30, or 60 seconds long when read. Similarly, some newspapers will print brief announcements free, or may provide a feature story on a future project. Contact the local paper and/or community newspaper for specifications. If at all possible, have an experienced writer prepare the copy, keeping in mind the suggestions made above.

Another booklet which will give innumerable suggestions for writing press releases, letters, and feature stories, and generally making a case public, is one which was published by the Co-Ordinating Council for Handicapped Children in Chicago. It is called "How to Organize an

Effective Parent Group and Move Bureaucracies," by Charlotte Des Jardins. It is available by writing to the Council at:
**407 South Dearborn**
**Chicago, Illinois 60605**

**Referrals can be obtained by tapping every available community resource**

Other, more innovative methods have been used with success in various parts of the country. It is widely agreed upon that a sibling trace is one of the most effective procedures for eliciting referrals. This is a method by which children who are enrolled in special classes in school are sent home with notices for their parents. Assuming that some children receiving special education services will have younger siblings at home who are also handicapped, parents are encouraged to submit any preschool aged children for screening. There are certain persons and agencies who are affiliated with city, county, or state government and who may be good contacts, such as: Public Health Nurses, welfare agents, personnel in Departments of Public Aid for Migrants, and any agencies serving handicapped children. Sources which seem less likely but might be worth contacting are repairmen for public utilities, Welcome Wagon people, and mail carriers. If a brochure is prepared which states the purpose of the screening and includes such pertinent information as time, place, and so on, it may be distributed in barber and beauty shops, public buildings, and any place which receives a fairly heavy traffic flow and which is amenable to having such literature placed there. Again, remember to make brochures and announcements clear, concise, and optimistic sounding.

### 4. Determining curriculum needs

**The program must be filling a real need. NEED = number of unserved kids—number of services presently available.**

When the screening effort has been completed and agencies surveyed, the areas of need for the target population should be fairly clearly delineated. In planning a program keep in mind that a program is not viable and worthwhile unless it is actually filling a need. "Need" can be defined as the gap which still exists between available services and evidenced unfulfilled needs of children after a thorough community assessment has been conducted. Thus, in most cases, a new program will have special qualities about it because it is filling a unique need.

Establishing contact with other service agencies early in the planning stages, and maintaining good communications with such agencies will insure that the proposed program will help meet an existing need for services, and will help to avoid wasteful duplication of efforts on the part of those in the business of helping handicapped children. Planning a program in isolation is likely to result in a poor

understanding of service needs, an inability to adequately meet such needs, and subsequent failure to gain vital community support.

### 5. Assessment for prevention

**Screening of newborns and continuous reassessment is what it's all about**

The screening effort provides an excellent opportunity for the establishment of a continuous reassessment process in a particular community. In order to effectively assess for prevention, all newborns should be screened for observable handicaps and children should be reassessed every year until they reach school age. Records should be kept of children in the established programs for the purpose of determining whether needs are really being reduced. For example, if the primary schools in the area served by a preschool placed 10% of their incoming first graders in special classes before the program began, and two years later were still placing 10% in special classes, a reassessment of the program and the community needs should be completed.

**Cultural differences must be accounted for to insure accurate measurement of progress**

A note is in order at this point concerning the testing of children who represent various minorities. If the area in which children are being screened encompasses a substantial percentage of minority races, it is imperative that special considerations be made for these children. It is widely known that special education classes contain higher proportions of blacks and other minorities (in relation to the total school population) than they do white children. There are several reasons for this situation, most of which reflect the lack of bi-cultural consciousness of our "white culture." Fortunately these attitudes are changing, but the situation remains basically the same. Most traditional I. Q. tests foster the "melting pot" theory which suggests that Americans have one culture and that we all are, or should be, a part of it.* Since diagnoses of handicaps are often based on I.Q. scores, children whose backgrounds are alien to the types of questions on these tests often appear to be delayed in their intellectual development.

Several possible solutions to this dilemma have been suggested.* Some are as follows:

1. Modify existing tests by translating them into other languages.
2. Experiment with differential weighting of verbal and non-verbal portions of tests.
3. Modify assessment procedures so that the bicultural child is not penalized for his/her biculturality.

* Jane R. Mercer, "Crosscultural Evaluation of Exceptionality," *Focus on Exceptional Children*, September, 1973.

4. Use multiple norms so that performance can be evaluated in terms of both dominant Anglo culture and the child's own cultural milieu.

Such measures should carry over into the curriculum of a preschool as well. For example, teachers should recognize and accept children's background differences, allowing them to express themselves in those terms. If a child's non-school language is different than the one used by teachers, it should be recognized only as "different," not "deficient." Until the child familiarizes him/herself with the language used at school, use the natural language as a vehicle for teaching skills, and then teach the school language as an alternative or second language.

**Care taken now may prevent problems later**

In all areas of assessment, good judgment and tact are necessary requirements, together with a strong sense of commitment to the concept of early intervention. Decisions will have to be made regarding which tests to use, interpretations will be called for when the results are in, choices will have to be made in the planning stages. Careful study and planning, then, should be devoted to the effort in these very early stages to assure that the data upon which you base your program is indeed giving accurate indications of proper directions to take.

Chapter Three

# Funding for Preschool Programs

If we believe that preschool programs are beneficial and should exist, the major problem in making the idea a reality may be money. On the subject of funds for preschools for the handicapped there is good news and bad news. The good news is that there are funds available from a number of sources. The bad news is that it can be a complicated task to locate and to acquire the available funds. The sources of available funding may differ according to where you live; whether you are a public school, private non-profit organization, or interested individual; what type of children you intend to serve; and what type of program you intend to set up.

## The Federal Government

The Department of Health, Education and Welfare wants to stimulate the development of preschool services in general. Their approach is to start in the areas of the greatest need: compensatory education for the disadvantaged and early education for the handicapped. The Bureau of Education for the Handicapped reasons that the earlier a child's handicap is identified and help given in the form of therapy, remedial training, or special education, the greater the possibility that the handicap may be overcome or compensated to the point that the child may function successfully within the mainstream of education with minimal amounts of special care. Ideally, this would lead to the child growing to become a productive adult who is less dependent on long-term subsidy or assistance.

There are nearly 1 million preschool-aged handicapped children in the United States. The federal government places a high priority on education of these children. But they expect in the long run it will be the responsibility of state and local agencies to provide the funds and services related to the needs of the handicapped children in their area. In order to stimulate these funds, the federal government is providing substantial amounts of "catalytic" money to start demonstration projects and state preschool plans which will eventually be continued and extended through state and local funding. At present there are three major federal programs providing funds for early education of the handicapped.

**Handicapped Children's Early Education Program: Title VI: Part C (PL 91-230)**

This legislation provides grants or contracts to public or private non-profit agencies for establishment of model early education programs or services to handicapped children and their families. The goal of the projects funded under this law should be directed toward integrating handicapped children into regular education systems or to require less intensive levels of special education. The program is designed to stimulate model projects of national significance that will be accepted and duplicated by other non-federal agencies. Grants are issued for up to 3 years. State, local, or private funds are expected to continue the program beyond the initial grant period. A local contribution of 10% of the total project cost (provision of space, transportation, professional services or cash) is required during the grant period to establish local commitment to the program. Grants made during the fiscal years 1971 to 1973 ranged from $25,000 to $100,000 per project.

Regulations are available which outline in detail the proposal requirements: what to include in the proposal, specific requirements for grantees, instructions for submission and review procedure. To obtain the manual and/or further information write to:

**Handicapped Children's Early Education Program**
**Program Development Branch**
**Bureau of Education for the Handicapped**
**U.S. Office of Education**
**Washington, D.C. 20202**

**Handicapped Preschool and School Programs: Title VI: Part B (PL 91-230)**

This funding source provides non-matching formula grants to states for the initiation, improvement, and expansion of educational and related services for handicapped children at preschool, elementary, and secondary levels.

States wishing to participate must submit an annual state plan which describes proposed activities and essentially assures that the funds will be spent for the designated purpose and that they will "supplement, rather than supplant" the state funds. Local agencies who wish to capture some of these funds should submit applications to the state education agency for approval and inclusion in the state's description of proposed activities to be carried out during the year of the grant.

The grants are awarded yearly on a formula basis according to the ratio of the state's 3 to 21 year population compared with the total 3 to 21 year population in the U.S. The funding has ranged from $200,000 to $2,700,000 per year and averages about $500,000 per state (these figures may be different as the funds are continued through the '75 to '76 fiscal years). Outlying areas--Samoa, Guam, Puerto Rico, Trust Territories, etc. are also eligible to receive these funds based on their needs as determined by the Commissioner of Education.

The rationale behind the funding is to stimulate more programs for the presently unserved handicapped in the 3 to 21 year age group. The funds act as a catalyst to further state and local support of programs for the handicapped. Under the program 1 million more handicapped children were being served in 1973 than were served in 1968. Less than one quarter of that 1 million were served directly by the federal funds.

For further information write to your state director of special education, state coordinator of Title VI projects or:

**State Plan Officer**
**Aid to States Branch**
**Division of Educational Services**
**Bureau of Education for the Handicapped**
**U.S. Office of Education**
**Washington, D.C. 20202**

**Headstart**

An amendment to the Economic Opportunity Act requires that at least 10% of Headstart funds be used to serve handicapped preschoolers. Although Headstart has always maintained an open door policy regarding the handicapped, this insures that each Headstart program will include handicapped children in their classes. There is also a provision that 10% of the Headstart's students may be above the poverty level requirements. These students are admitted on a fee-paying basis. Handicapped children whose families are above the poverty-level financial requirements may be included among this 10%.

The impact of this legislation means that some previously unserved handicapped youngsters will be identified and provided early help through a preschool experience.

It will also cause Headstart projects not previously including handicapped students to make some adjustments in order to successfully integrate them into their program.

Regional service agencies and personnel are being identified to help local programs deal with the special problems of handicapped pupils. For information, contact your local Headstart program personnel or your Regional Office of Child Development. For Oregon, Washington, Idaho, Alaska, contact:

**Region X Office of Child Development**
**1321 Second Avenue**
**Seattle, Washington 98101**
**(206) 442-0260**

### Developmental Disabilities Act (PL 95-517)

This is a very broad piece of legislation administered through the Social and Rehabilitation Service, Rehabilitation Services Administration. It provides money for services and facilities to meet the needs of persons with developmental disabilities. Developmental disabilities are defined as chronic disabilities attributable to mental retardation, cerebral palsy, epilepsy or other neurological conditions similar to mental retardation that substantially handicap the individual.

Part C of the legislation provides formula grants to states to develop and implement comprehensive and continuing plans for meeting the needs for services to the developmentally disabled. Through a planning and advisory council appointed by the governor of each participating state, grants may be made to public or nonprofit private agencies for construction of facilities and provision of services to persons with developmental disabilities. The development of preschools is one of the many types of services which can be funded by this legislation. Application for funds under this legislation must be made to the state planning and advisory councils. A list of State Advisory Councils for Region X is provided below.

### State Planning and Advisory Councils on Developmental Disabilities

Alaska

Chairperson — 0-277-6287
State Planning & Advisory Council
on Developmental Disabilities
1046 West 20th Avenue
Anchorage, Alaska 99503

Idaho

Chairperson — 8-208-342-2711
State Planning & Advisory Council — ask for 523-2459
on Developmental Disabilities
1245 Merrett Drive
Idaho Falls, Idaho 83401

Oregon

Chairperson
State Planning & Advisory Council
on Developmental Disabilities
5415 SW Westgate Drive
Portland, Oregon 97221
8-503-221-0111
ask for 297-1838

Washington

Chairperson
State Planning & Advisory Council
on Developmental Disabilities
Experimental Education Unit
Child Development and
Mental Retardation Center
University of Washington
Seattle, Washington 98105
8-206-442-0111
ask for 543-4011

## State Planning and Advisory Councils on Developmental Disabilities

Alaska

Coordinator
Office of Developmental Disabilities
Department of Health & Social Services
Pouch H
Juneau, Alaska 99801
0-586-6257

Idaho

Coordinator
Developmental Disabilities
Department of Environmental
and Community Services
Statehouse
Boise, Idaho 83720
8-208-964-3269

Oregon

Planning Director
Developmental Disabilities
Office of Comprehensive Health Planning
River Grove Office, Suite 213
2111 North Front Street
Salem, Oregon 97310
8-503-378-4160

Washington

Director
Department of Social & Health Services
Office of Developmental Disabilities
Social Services Division
Post Office Box 1788
Olympia, Washington 98504
8-206-753-5417

## Developmental Disabilities (Service Agencies)

Alaska

Coordinator
Office of Developmental Disabilities
Department of Health & Social Services
Pouch H
Juneau, Alaska 99801
0-586-6257

Idaho
Administrator for Planning & Quality Assurance
Department of Environmental & Community Services
Statehouse
Boise, Idaho 83720
8-208-964-3348

Oregon
Director
Programs for Mentally Retarded and Developmentally Disabled
Mental Health Division
Department of Human Resources
2570 Center Street, NE
Salem, Oregon 97310
8-503-378-2429

Washington
Director
Department of Social & Health Services
Office of Developmental Disabilities
Social Services Division
Post Office Box 1788
Olympia, Washington 98504
8-753-5417

In addition to the state aid funds, the Developmental Disabilities Act provides some university-affiliated funds which may be used to set up preschools as part of a training program for people who will work with the developmentally disabled. Though most of these funds are presently committed, interested agencies should write to their regional office (addresses below).

There are also regional "discretionary" funds which are reserved for special programs or projects of national significance which are consistent with, but not necessarily included in the state plan. These funds, too, may possibly finance preschool services for the developmentally disabled. These projects are reviewed and approved directly by the federal government through the regional offices.

For further information on funding through the Developmental Disabilities Act, contact:

**Regional Representative for Rehabilitation Services**
**SRS, Region X**
**1321 Second Avenue**
**Seattle, Washington 98101**
**(206) 442-0528**
**(Alaska, Idaho, Oregon, Washington)**
or:

**Regional Commissioner**
**SRS Region IX**
**50 Fulton Street**
**San Francisco, California 94102**
**(American Samoa, Guam, Hawaii, California, Arizona, Nevada)**

### Other Federal Sources

A number of the other ESEA Title programs provide funds which may be applied to the development of services to handicapped preschoolers even though they aren't specifically written for that purpose. Title I funds, for instance, are targeted for the educationally disadvantaged. Part C of the legislation provides money for preschool programs which meet the needs of children identified as likely to have problems in school upon entering first grade. This may well include mentally and physically handicapped youngsters. These funds can be sought through the state Title I Coordinator.

Oregon Division of Mental Health advised that PL 89-313, an amendment to the Title I funds, provides money for the development of preschool programs for developmentally disabled to approved school districts who have supported other programs for developmentally disabled for at least two years. These funds are handled through the state Mental Health Division. (See address on page 26.)

## State Funds

For the most part, states have been responsive to the federal funding programs. They will continue to finance programs that were started under any of the various federal funding sources. Some of the states are beginning to appropriate money for preschool services beyond the funds they must appropriate in order to get federal funds.

**Oregon** has legislated $125,000 for preschool programs, mainly for the severely retarded. Most of these funds, through the Mental Health Division, Programs for MR/DD, are already committed for the first two years. Beyond that the Mental Health Division hopes that the funds will be continued and expanded so that new programs may be funded throughout the state.

**Idaho** has expressed its interest in early childhood education by establishing the Idaho Office of Child Development. This office has spent some time and resources in surveying the present services and needs of children in Idaho. The state has been responsive to picking up and continuing federal funding programs for early education of the handicapped.

**Washington** will fund preschools for the handicapped at the request of local districts. The state has funded 42 new programs this year. Local administrators who wish to apply for state funds should send a description of their proposed program to the Office of the State Director of Special Education.

Your state, if not one of the above, may also have allocated state funds for preschool programs. Some state agencies which can be contacted regarding funds for preschools for the handicapped are:

**Oregon**

Director of Special Education (503) 378-3598
Coordinator, ESEA, Title VI (503) 378-3598
Coordinator, ESEA, Title I (503) 378-3606
Oregon Board of Education
942 Lancaster Street, NE
Salem, Oregon 97310
Programs for MR/DD
2570 Center Street, NE
Salem, Oregon 97310 (503) 378-2429

**Washington**

Director of Special Education (also in charge of Title VI) (206) 753-2563
Department of Public Instruction
P.O. Box 527
Olympia, Washington
Child Development Planning Project (206) 753-4922

**Idaho**

Director, Special Education (208) 384-2186
State Department of Education
Boise Statehouse
Boise, Idaho 83707
Director (208) 384-3515
Idaho Office of Child Development
Statehouse
Boise, Idaho 83720
Department of Environmental Protection and Community Services (handles State Handicapped funds)
650 W. State Street
Boise, Idaho

**Alaska**

Director of Special Education or (907) 586-5231
Federal Project Officer
State Department of Education
Pouch F
Juneau, Alaska 99801

**Trust Territory**

Coordinator, Special Education
Trust Territory of the Pacific Islands
Office of the High Commissioner
Saipan, Mariana Islands 96950

## Private Sources

Various private organizations involved in working with the handicapped can be very helpful to anyone interested in starting preschools or other services. Some, like the Association for Retarded Citizens, are basically "people-connectors," though they do initiate some programs. They can put you in touch with the people most likely to have relevant information, sources of funds, and sometimes consultancy help. At a state level, these organizations often lobby to encourage legislation related to the needs and rights of the handicapped. The National Association for Mental Health actually provides "seed" money through some of the local chapters to initiate services (such as preschools) for unserved handicapped children. They do so with the understanding that the local school district or state will pick up the funding after a reasonable period of time (usually two to three years). The Mental Health Association of Oregon has expressed its encouragement at the results of some of the local programs in getting the local school districts and state agencies involved in committing more funds for services at this level. Community-based civic groups are sometimes willing to help sponsor special projects, too.

The following is a list of national chapters of many such agencies. Local chapters are listed in the phone directory.

**Association for Children with Learning Disabilities**
**2200 Brownsville Road**
**Pittsburgh, Pennsylvania 15210**

**Epilepsy Foundation of America**
**1828 L Street, NW**
**Washington, D.C. 20036**

**National Association for Mental Health, Inc.**
**1800 N. Kent Street**
**Arlington, Virginia 22209**

**National Association for Retarded Citizens**
**2709 Avenue E East**
**Arlington, Texas 76011**

**National Society for Autistic Children**
**621 Central Avenue**
**Albany, New York 12206**

**United Cerebral Palsy Association, Inc.**
**66 East 34th Street**
**New York, New York 10016**

## Acquiring Funds

Despite the seemingly wide range of people and projects involved in funding preschool programs for the handicapped, more dollars are requested than there are

appropriations. In every federal and state program the great numbers of proposals received make the bidding quite competitive. Often preschools are run by a few dollars from one source, some from another, a bit of tuition, and a good deal of community fund raising. It takes a determined administrator who believes in the value of early education for the handicapped to acquire and maintain adequate funds for a good program. It takes time for state legislators and local school districts to re-order their budgetary priorities in order to bring about a new service. They are much more willing to do that after the program has been shown to be both valuable to the community and cost-effective. This generally means that the administrator will have to look to federal or other sources for the initial funds.

Just how much money is needed for a preschool program? Estimates differ. The Education Commission of the States* estimates that a 3 hours/day preschool program should run about 1½ times as much as is currently being spent on elementary school students on a per-pupil basis. This estimate reflects the feeling that in a preschool program the student-teacher ratio must be lower than in the average elementary school. Preschool personnel should, of course, be as well trained and as well paid as their elementary counterparts. (See Chapter on Personnel.) This is not presently the case in many states. The higher cost may also include the cost of food, transportation, medical, social, and related services which would help to insure a preschool program that could help the "whole child" and his family.

Kindergartens in the United States spend between $17 and $900 per pupil per year (1970 figure). The cost averages about $250. Headstart programs spend $1,000 per pupil on the average (this includes the kinds of auxiliary costs mentioned above.) The typical private preschool spends between $500 and $800 per pupil. Their budgets vary according to how much tuition they charge and are related to the economic level of the clientele they serve. Overhead costs in most public kindergartens are lower and can be absorbed into the larger school district operations. Small private preschools must spend a larger part of their budget on housing and administrative costs. If preschools become an accepted part of the educational establishment, administrative costs should lower, thus leaving more funds for classroom use.

Whether a program has just enough money to get by, or whether it is fortunate enough to afford an extensive program, certain basic costs must be covered. Facility, equipment, supplies, and personnel are all either initial or

* *Early Childhood Development, Alternatives for Program Implementation in the States.* A report on the Education Commission of the States Task Force on Early Childhood Education. June, 1971.

27

constant costs, though the amount of money spent will vary from program to program. It is possible that highly skilled personnel may be the school's most important investment. A creative master teacher and staff can make the most out of equipment, facilities, supplies, and other aids.

Unfortunately, we do have to be concerned about money for programs, but the important point is the quality of those programs. You may have to "beg, borrow, or steal" to make ends meet, but the primary focus should always be on maintaining a quality program for the handicapped children being served.

Chapter Four

# Curriculum

Some people use a curriculum guide like a book of rules. A curriculum guide (the outline of subjects, concepts, and skills to be covered in the course of a school year) may better be regarded as somewhat like an atlas. It provides a representation of the total scope of a program. It serves as a map of development and a "Guide Michelin" for the teacher to help her tailor programs to facilitate the growth of each child in the class.

Just as an experienced traveler plans for a trip, is aware of alternate routes, and keeps referring to his/her map for guidance, the teacher must plan instructional sequences and use a curriculum guide (whether formally written or informally stated) in a similar manner.

Continuing the analogy, children may start from different places, move at different rates, require different means of transportation, and may not all be going the same place at the same time. The teacher's role is that of a travel agent, tour guide, and traffic controller. In order for children to move successfully through a curriculum, picking up skills and experiences which will help them guide themselves through life, they will need help. A teacher needs to pinpoint where the child is (assessment), set up an itinerary (objectives), identify the appropriate roads to take (instructional sequences), set down a time plan or schedule for the trip, and sometimes be the chauffeur or guide.

Trips do not always go as planned—neither does classroom instruction. There are times when the chosen instructional methods somehow do not help the child reach his goal. Adjustments should then be made. There are

times, too, when the detours and side trips become the basis of valuable and interesting experiences. The curriculum, like a good map, will still stand as a guide to refer to whenever one needs to know where he is and how to get from one place to another.

**A curriculum for handicapped children must be one which can be fitted to the individual needs of every student**

The curriculum of a preschool program for the handicapped is similar to any other preschool curriculum in its goal of helping children be independent, attain their full potential for social, emotional, physical, and cognitive growth, and to prepare children to enter the mainstream of education. The curriculum may be unique in that in order to meet the needs of handicapped children it may need to start at a lower developmental level, be far more individualized, and more concentrated on small steps of progress which lead to self-sufficiency.

A basic curriculum might attend to broad content areas such as development of communication skills, motor development, cognitive development, and social-emotional development. The specific skills which children normally develop during their early years overlap within and between these content areas. The following is a general and partial list of those skills that may be included in a preschool curriculum:

1. **Self Help Skills**
   dressing
   feeding
   toileting
   grooming

2. **Motor & Manipulative Skills**
   grasping, holding objects
   coloring, cutting (eye-hand)
   kicking, skipping
   crawling, walking, climbing
   balancing, jumping
   playing with toys, puzzles

3. **Social Skills**
   responding to adults & peers
   sharing toys
   helping others
   waiting your turn

4. **Perceptual Skills**
   naming colors, shapes (visual discrimination)
   naming sounds (auditory discrimination)
   naming positions of objects
   clapping in rhythm
   repeating sound patterns
   discriminating textures
   discriminating smells, tastes

5. **Language Skills**
   naming objects
   using sentences
   answering questions
   following simple directions
   describing pictures

6. **Self Expression Skills**
   art
   music
   dramatics

7. **Pre-academic Skills**
   printing name
   saying alphabet or letter sounds
   counting objects orally
   following directions
   saying days of the week
   telling time to the hour

A number of curriculum guides are available that have been written for programs for handicapped preschoolers. These attend to skills development from the most beginning level and proceed to more advanced skill levels. Some guides which may be purchased or acquired free of charge are:

Allen, K. E. The preschool curriculum. (Excerpted from Telecourse Viewer's Guide to *Under six: The child in the preschool program.*) Seattle, Washington: University of Washington, 1966.

Medford School District, *Preschool Curriculum—Preschool Disability Identification and Prevention*, Medford, Ore., 1972.

Schattner, Regina, *An Early Childhood Curriculum for Multiply Handicapped Children*, New York: John Day, 1971.

Seattle Public Schools, *Instruction Guide for the Profoundly Mentally Retarded* (Nursery-Kindergarten). Available from Seattle Public Schools. Administrative and Service Center, 815 Fourth Avenue North, Seattle, Washington 98109.

*Teaching Research Preschool for the Multiply Handicapped* (Curriculum and Behavioral Objectives). Compiled by Teaching Research, Division of the Oregon State System of Higher Education, Monmouth, Oregon 97361, 1973.

## Choosing a Model

**There are many theories of early childhood education for handicapped children.**

While the necessary content of a preschool curriculum may be agreed upon in general, many approaches have been taken toward the teaching of skills. Differences exist about the relative order of importance of the content areas.

In recent years, a number of preschool models have attempted to provide "compensatory education" for disadvantaged children, stimulated by funds from federal anti-poverty programs. The models vary greatly on many

practical and theoretical issues. Some emphasize highly programmed pre-academic materials which the teacher presents to children. Others focus on the underlying processes of thinking and cognitive development as described by Jean Piaget. They emphasize concept formation through active participation and direct experience by the student. Another approach (considered child-centered or traditional) emphasizes the social and emotional development of the children within structured environments where "play is child's work."

Comparative studies of various programs and approaches have been done by Weikart (1971), Bissell (1970), and Bereiter (1971). In addition, *The Early Childhood Information Unit* has been prepared by the Far West Laboratory for Educational Research. It is a detailed review and analysis of 15 early childhood programs contained in nine filmstrip-cassette presentations and two manuals. The unit is available from Education Products Information Exchange (EPIE), 55 Bethune Street, New York, N.Y. 10014 ($88.00 or $79.65 prepaid).

Studies which have compared the various approaches in terms of effect on I.Q. of the children (Weikart, 1971 and Bereiter, 1971) reported little difference in results among the approaches in which there was a strong instructional emphasis. Custodial care situations and some of the traditional or "child-centered" approaches in which there was little or no planning, low teacher motivation and involvement and/or inadequate supervisory support were found to be less effective for children than the more formal, theory-based models. The evidence seems to indicate, then, that any of a number of models, or combination of models will work to benefit children if the teachers are involved and committed, plan intensively within the framework of a proven model, and are provided with ample supervision and support.

**Though results of studies have indicated that most models will benefit children if administered by skilled and committed teachers, some basic considerations should be made before any curriculum is adopted.**

The curriculum has the general purpose of focusing the energies of the teaching staff, as well as guiding them in planning their day-by-day lessons and instructional plans. In choosing or developing a curriculum model, it might be well to consider:

1. Its demonstrated effect (before and during its use) on changing the child's behavior. (If your model is a combination of other models or an original model not yet evaluated with children, it would be wise to evaluate it for some period of time before adopting it totally.)

2. How it relates to the educational and personal philosophies of staff members. (Though schools are for children, teachers will do a better job if they believe in and understand what they are doing.)

3. Its flexibility in providing success-oriented learning experiences for exceptional children who are apt to be at different developmental levels.

4. The provision it allows for involving parents in the education of their children: can they be involved in planning; does it provide a model they can use if instructing their child at home; does it allow for feedback to parents about the progress of their child in school? Is it consistent with community philosophy?

**Most commercial materials will have to be adapted to the smaller steps and slower progress of handicapped children.**

Regardless of the curriculum model, the learning needs of children are met through the daily routines of assessing learning needs, devising lesson plans, organizing the classroom, providing learning materials, working with the children, and checking progress. Though this process is basically the same in any well-planned classroom, special considerations must often be made for adapting curriculum, materials, and learning sequences to the needs of the handicapped. Most commercially developed materials, even programmed materials, were designed for use with "normal" children. Often the learning units are not small enough, the pace not slow enough, the level not low enough for the severely handicapped student. Adaptations can be made, if it is realized that for the handicapped, progress is often made in inches, not in feet or yards.

The remainder of this section describes some of the techniques which help a teacher to adapt a curriculum and a program to the unique needs and interests of the children within the program.

The following description of a task-analytic method of approaching classroom instruction is included because it has been shown to be a very effective means of teaching handicapped children and of documenting their progress. You may find that these guidelines do not comply with your projected format, or you may want to implement even a more technical version of such a model. The point is that the guidelines included here are just that—guides toward helping you find the best methods of bringing maximum benefits to the children in your program.

## Screening and Assessment

**In order to begin individualizing instruction, teachers must know, through a preliminary screening, what a child can and cannot do.**

Often in the normal preschool setting children are assumed to be functioning somewhere close to the developmental norm. If this is not the case, the child is expected to get along with the curriculum as best he can—whether he's above or below the curriculum level. While a curriculum tailored to meet individual needs, interests, and competencies is desirable in a normal setting, it is a necessity for exceptional children. In defining an individualized curriculum in the preschool setting, decisions must be made for each child regarding the child's strengths, his

crucial developmental deficits, skills he should learn in order to facilitate his overall development and learning, skills he appears to be ready and able to learn. Also, decisions about class size, adult-student ratios, curriculum emphasis, facilities, and equipment needs will depend upon the types and level of the children who will be included in the program. Pre-program screening should provide general information about each child, including any present handicapping conditions, in order to begin to answer the above questions. The screening should also include sight and hearing tests by a nurse or physician. It is not uncommon to find that in addition to obvious handicaps, these children may also suffer from more subtle abnormalities which may go unnoticed because of attention to the major condition. As each child enters the program, a more detailed assessment of skills needs to be made as an essential first step to individualizing instruction. Some questions asked might be: Does the child sit up? crawl? stand? take steps? walk? run? jump? hop? Does the child imitate sounds? words? echo words? phrases? Does he use simple sentences? A teacher of the handicapped needs to know these things, not in order to compare the child with a developmental norm, but to determine what skills the child has and those he needs to learn.

Some assessment instruments designed to be used with young children are listed below:

*AAMD Adaptive Behavior Scales*. American Association on Mental Deficiency, publisher.

Purpose: to provide an objective behavioral statement and a behavior rating scale for individual mentally retarded and emotionally disturbed people. For children five and under, special instructions for administration are given.

*The Basic Concept Inventory*, by Siegfried Engelmann, Chicago: Follett Educational Corp.

Purpose: to assess concepts needed for successful completion of elementary grades. Concepts tested are those which are thought not to be taught, appear fairly basic, and are unlikely to be tested and/or diagnosed by a teacher.

*The Boehm Test of Basic Concepts*, by Ann E. Boehm, N.Y.: The Psychological Corp.

Purpose: to measure children's mastery of 50 concepts considered necessary for achievement in the first years of school.

*The Denver Articulation Screening Exam*, by Amelia F. Drumwright. University of Colorado Medical Center, 1971.

Purpose: to identify sounds peculiar to words represented pictorially on small cards. The child says the word and is given appropriate credit if articulation is correct.

*Preschool Disability Identification and Prevention*, Medford, Oregon: Medford School District 549C.

Purpose: to assess skills in areas of language, pre-reading/reading, math, and perceptual motor skills. A curriculum written in behavioral objectives to provide the preschool teacher with a day

to day evaluation tool upon which to make program planning decisions for each child.

*Progress Assessment Charts*, by H. C. Gunzburg, Bristol, Indiana: U.S.A. Distribution Center. (Chart 1)

Purpose: attempts identification of specific skill strengths and weaknesses for young children through young adults. Measures four main skill areas (self-help, communication, socialization, occupation).

*Project Childfind Educational Needs Assessment*, Eugene, Oregon: Regional Resource Center, University of Oregon.

Purpose: to pinpoint specific skills and skill levels in the academic aeas: reading, spelling, language, concepts, math, social skiils, and self-help skills. Results are to be used for writing appropriate individualized academic programs.

**Teacher-made criterion-referenced tests mean children are being tested only on learning sequences which are part of their curriculum.**

Teachers can develop their own assessment instruments for curricular content areas in which other assessment instruments are inadequate or not available. The development of criterion-referenced test(s) can be relatively simple if the teacher (1) has an idea about the child's present skill level and (2) can pinpoint those skills the child should have by the time he leaves the program.

The basic steps to criterion-referenced testing are as follows:

1. **State terminal objective**: (refer to the following section on Objectives for complete instructions on writing behavioral objectives)
   - ☐ Child will sort 12 shapes including circles, squares, and triangles into 3 distinct piles in 10 minutes without error.
2. **List Subtasks or Intermediate Objectives:**
   - ☐ Child will be able to sort correctly circles and squares in 5 minutes
   - ☐ Child will be able to sort correctly circles and triangles in 5 minutes
   - ☐ Child will be able to sort correctly squares and triangles in 5 minutes
   - ☐ Child will be able to sort correctly circles, squares, and triangles in 10 minutes
3. **Select or develop materials appropriate for demonstration of the skills and subskills:**
   From construction paper cut out 4 each of the three shapes, 12 total.
4. **Write directions you will say to students:**
   "Put all the circles here, the squares here, and the triangles here." Demonstrate for the child. Repeat for the other subtasks.
5. **Test the child and evaluate:**
   - ☐ The test is simply the presentation of the materials (step 3) and the directions (step 4). Evaluation

is determined by simply passing or failing the stated criterion at each step. If, at any level, the item is failed, instruction is targeted for that behavior. If the terminal objective is met, assessment at a higher level is initiated.

The advantage of teacher-made criterion-referenced tests is that they can be very specifically related to the learning sequence the child is experiencing. The child is less likely to be tested on something that will not be part of his curriculum. They can also be used throughout the program as a guide to the teacher about the success of the learning activities and sequences in teaching the skills the child is expected to learn.

For more information on criterion-referenced tests, see:

Popham, W. James, and Husek, T. R. "Implications of Criterion-Referenced Measurement." *Journal of Education Measurement*, Spring, 1969, 6, 1-9.

Block, James H. "Criterion-Referenced Measurements: Potential." *School Review*, February, 1971, 79 (2), 289-298.

DeCecco, John P. *The Psychology of Learning and Instruction: Educational Psychology*. Engelwood Cliffs, N.J.: Prentice-Hall, Inc., 1968.

**Exceptional children may be grouped with other children at similar developmental levels.**

Based on the assessment, children may be grouped in classrooms according to the similarity or compatibility of their instructional needs. While normal preschoolers are usually grouped by chronological age, this is not as reliable an indicator of development for exceptional youngsters. Homogeneous grouping is not necessarily a requirement for a workable instructional setting. However, many teachers find that there are advantages both for themselves and for the students when developmental levels and learning needs are generally similar.

## Objectives

**Learn to use properly stated objectives.**

Once assessment has been completed, the teacher's task is to state behavioral objectives for the instruction of each student. A behavioral objective is a statement which identifies the skill the student will be able to perform after instruction. A well-stated objective will have a subject (the learner), an active verb (stating the behavior or behavior product to be demonstrated); it will imply the conditions under which the behavior will occur, specify the materials to be used as well as a criterion or standard by which performance may be objectively judged.

**Objectives can help in evaluating student and teacher.**

Behavioral objectives provide structure and direction to learning sequences and help a teacher to know whether the student is performing adequately in relation to the instructional goals. They provide a standard for evaluating the results of instruction for both the student and the teacher. Objectives can be specified for any skill in all curriculum areas. Note these examples:

| | |
|---|---|
| **Self-help/ Motor** | Joy will take off her coat without assistance within 10 minutes of her arrival at school. |
| **Motor** | Ken will stack at least 5 blocks to make a tower when provided with blocks and asked to build a tower as tall as he can. |
| **Self-help/ Motor** | Londa will correctly lace and tie the strings on the lacing board during "skills-practice" time. |
| **Language/ Social** | Abby will call the names of all the children in the classroom with no errors when teacher asks her, "Who came to school today?" |
| **Social/ Language** | Ben will initiate a conversation with at least one other child during morning playtime. |

Behavioral objectives can be written for a group as well as for specific children: "The learner will count from 1 to 10 within ten seconds of teacher command and without assistance."

Pointers about objectives:

☐ Keep them positive—think in terms of "the child will" rather than "the child will not."

☐ Keep them simple—use only one verb per objective—that way you are asking for only one activity at a time.

☐ Keep them observable—use active verbs that describe activities anyone can agree upon having seen or not seen occur.

Which of these is easier to evaluate?

1. Mary will show maturity in social situations.

2. Mary will share a toy with another child during playtime.

1. Carl will be a good reader.

2. Carl will read aloud 100 words per minute with less than 3 errors.

Terms like "maturity" and "good reader" may mean different things to different people. But a teacher, an aide, or

a child could agree upon having seen Mary share a toy or Carl read 100 words per minute.

☐ Keep the objective clear and fair to the child—always include a criterion of acceptable performance. State a standard of efficiency, fluency, or accuracy for performance of the task. Take into consideration what skill level the child can reasonably be expected to reach after a specified amount of instruction. This helps the teacher to know whether or not instruction has been effective and whether objectives have been met.

Many books have been written about the construction of objectives. Two examples are:

Mager, Robert F. *Preparing Instructional Objectives.* Palo Alto, Fearon Publishers, 1962.

Mager, Robert F. *Goal Analysis.* Palo Alto, Fearon Publishers, 1969.

## Task Analysis

**Analyzing the task related to a terminal objective means breaking it down into steps small enough to allow the child relatively quick success on each step.**

Behavioral objectives often involve the mastery of many smaller tasks before the final objective can be accomplished by the student. A task analysis is the process of describing the sequence of small, prerequisite skills (intermediate objectives, or sub-tasks) which the learner needs to know prior to the performance of the terminal objective. By repeatedly answering the question "what does the person do next," a list of sub-tasks or a task ladder will result. Some children will move quickly through these sub-tasks and seem to meet the objectives effortlessly. For the handicapped child, objectives are often accomplished one sub-task at a time, and for the severely handicapped even the sub-tasks sometimes need to be broken down into smaller steps. When a teacher analyzes the tasks of a given skill for a particular child, she should make the sub-task steps of a size that allows the child to have relatively quick success and accomplishment. Adjustments can be made, if the tasks are too difficult, by further breakdowns of the sub-tasks. See the following page for examples of a breakdown of objectives, tasks, and suggested activities in a preschool curriculum. This outline was not meant to be comprehensive, but rather to provide an example of how a curriculum guide may be organized.

Note that the intermediate objectives in the first examples are listed in an order that is *backward* from the way the skill is finally performed. This technique of teaching the last-step-first is called "backward chaining." The rationale is to insure that what you are reinforcing is always the successful completion of a task. As soon as the child can pull the coat off his arm, as in step 1.1, he can

be praised, "Good! You took off your coat!" Then he can go on to the more complicated task of taking both arms out of his coat, and so forth. Many dressing skills and grooming skills (skills which require a particular sequence of movements) can be taught through backward chaining.

## Skill Area—Self-help: Dressing

| Terminal Objective | *Intermediate Objective | Sub-tasks | Suggested Activities |
|---|---|---|---|
| 1.0 Child will remove unzipped coat without assistance in ½ minute | 1.1 Child will pull coat off when dominant arm is freed—10 seconds | 1.1.1 Grasps sleeve<br>1.1.2. Pulls coat from arm | • Practice taking off loose fitting vests |
| | 1.2 Child will pull coat off when coat is unzipped and both arms are in coat—30 seconds | 1.2.1 Shrugs shoulders to push coat back<br>1.2.2 Frees one arm<br>1.2.3. Grasps sleeve<br>1.2.4. Pulls coat from arm | • Practice with loose-fitting long sleeved garments |
| 2.0 Child will unzip and remove coat without assistance in 1½ minute | 2.1 Child separates zipper and removes coat—45 seconds | 2.1.1 Child grasps zipper slide and separates coat<br>2.1.2 Shrugs shoulders to push coat back<br>2.1.3 Frees one arm<br>2.1.4. Grasps sleeve<br>2.1.5. Pulls coat from arm | • Practice with oversized zippers on "dresser-vests" and zipper frame<br>• Practice on large "Dressy-Bessy," "Dapper Dan," or "Buttons-the-Clown" dolls |
| | 2.2 Child unzips coat and removes—90 seconds | 2.2.1 Holds coat taut<br>2.2.2 Grasps slide<br>2.2.3 Pulls slider part way down<br>2.2.4 Pulls slider to end.<br>Repeat steps 2.1.1-2.1.5 | • If zipper slide too small for child to hold, attach a tassle chain to it so that it is easier to grasp |

## Skill Area—Cognitive: Color Recognition

| Terminal Objective | Intermediate Objective | Sub-tasks | Suggested Activities |
|---|---|---|---|
| 1.0 Child can abstract the quality of color from similar common objects & forms:<br><br>Criterion: Child can match colored objects, red, yellow, green, blue, when presented with appropriate materials.<br><br>Child can point to red, yellow, green, blue objects when asked to.<br><br>Child can name colors red, yellow, green, blue, when presented with common objects similar except for color. | 1.1 Child can sort a set of 8 blocks (2 colors) into cued containers after teacher has demonstrated procedure. (matching) 1 minute | 1.1.1 Child can sort blue/yellow<br>1.1.2 Child can sort blue/red<br>1.1.3 Child can sort blue/green<br>1.1.4 Child can sort red/green, etc. | Provide blocks or other simple colored objects (poker chips, balloons) and containers cued with appropriate colors in which to sort them (boxes, trays, muffin tins) |
| | 1.2 Child can sort a set of 8 blocks (two colors into two piles after teacher verbally directs, "Put all ..... blocks here and all ..... blocks here.") 1 minute | 1.2.1 = 1.1.1<br>1.2.2 = 1.1.2<br>1.2.3 = 1.1.3<br>1.2.4 = 1.1.4 | |
| | 1.3 Child can sort a set of 12 blocks (3 colors) into color-cued containers after teacher demonstrates. | 1.3.1 Child can sort red/yellow/blue<br>1.3.2 Child can sort red/yellow/green<br>1.3.3 Child can sort blue/green/yellow<br>1.3.4 Child can sort red/green/blue. | |
| | 1.4 Child can sort a set of 12 blocks (3 colors) into 3 distinct piles given verbal directions. | 1.4.1 = 1.3.1<br>1.4.2 = 1.3.2<br>1.4.3 = 1.3.3<br>1.4.4 = 1.3.4 | |
| | 1.5 Same as 1.3 for 4 colors | Same | |
| | 1.6 Same as 1.4 for 4 colors | Same | |
| | 1.7 Child can point to appropriate colored block when asked, "show me the one" | 1.7.1 Child can identify correct color when asked to choose between two colors.<br>1.7.2 Same as 1.7.1 for 3 colors.<br>1.7.3 Same as 1.7.1 for 4 colors. | |
| | 1.8 Child can name color when asked "what color is this." | 1.8.1 Child can name one of 4 colors.<br>1.8.2 Child can name 2 of 4 colors.<br>1.8.3 Child can name 3 of 4 colors.<br>1.8.4 Child can name 4 of 4 colors. | |

## Programming and Schedules

Turning the terminal objectives, intermediate objectives, activities, and assessment information into a cohesive program which meets the needs of a number of preschoolers may seem like an impossible task. It does take time, requires careful planning, priority setting, imaginative use of facilities, materials, personnel, and schedules, but is not impossible.

**Using the results of assessment, concentrate on one or two weak content areas for each child. Develop objectives for the chosen skill areas then work to achieve each terminal objective.**

Always consider the basic program needs of the children when arranging schedules and events so that a program can run smoothly and efficiently. Based on assessment, choose one or two weak content areas on which to concentrate for each child. The content area chosen may be different for various children in the classroom. Some children, for example, may need more work in the areas of mobility and speech, while for others, self-help and cognitive skills may be stressed. After choosing a content area, develop behavioral objectives for instruction of the particular skill(s). Also focus on instruction in that content area during other daily activities. For instance, if objectives are targeted for Jeanie in the area of language development, (naming objects, using sentences, etc.), encourage Jeanie to talk about what she is doing. If she is taking off her coat, ask her to tell what she is doing, name parts of her coat, count buttons, etc.

If the teacher takes the overall schedule into account, planning individualized instruction can be simpler. In many cases individually prescribed activities can be combined with group instruction and/or social interaction periods. Practice on specific skills can be arranged at logical times of the day. For example, dressing and undressing skills can be practiced when the child arrives and before s/he leaves school, social skills and manners can be reinforced during juice time, and toilet training can be handled after juice time or before going outside.

Though instruction is individualized and may often be carried out on a one-to-one student-teacher basis, children will also benefit from exposure to and involvement in large and small groups.

Some programs operate well by having large, integrated groups, perhaps combining more than one classroom for music, opening exercises, or other appropriate activities. Specific motor or cognitive skills are then worked on in small homogeneous groups (formed on the basis of similar needs and objectives) or on an individual basis.

In the total program there should be a balance of physical-motor, cognitive, language, and preacademic activities. The correct balance will, of course, be determined by the educational needs of your children, taking into consideration your staff and material resources.

**The program should be scheduled to include a good balance of instruction in various content areas, with periods of rest and free time relieving periods of instruction.**

Pace the schedule to include both periods of activity and periods of rest, periods of concentrated direct instruction, and periods of free time. Many children respond to a schedule in which a short task is followed by an opportunity to participate in the activity of their own choosing. Success in completing short tasks often increases the child's interest and motivation to work on future tasks for a longer period of time. For further description of this method of classroom management, see Lloyd Homme, *Contingency Contracting in the Classroom*, Champaign, Illinois: Research Press, 1969 or Becker, Englemann, and Thomas, *Teaching: A Course in Applied Psychology*, Palo Alto: SRA, 1971.

The schedule should be consistent and predictable for children to help them develop a sense of sequence. This does not mean that one must do the same thing every day, but a daily and weekly routine should be established. If possible, children should be told in advance of any changes in the schedule or of special events.

Here is a sample schedule: yours may be similar or vastly different.

**9:00- 9:20 a.m. Arrival**
Self-help skills—dressing
coats, shoes, boots, fasteners
toilet training (as appropriate throughout day)
Social/language—greetings, conversation
Playtime—A brief free play period just after arrival allows child to adjust to school situation in his own way before beginning the day's work. Teacher may have some special activities ready (e.g., art projects) which she might invite the children to become engaged in when they are ready.

**9:30- 9:45 a.m. Communication Skills**
10 minute large group, roll call, announcements, language activities (songs, stories, pictures)
15 minute small groups (labels, prepositions, conversation)

**9:45-10:15 a.m. Cognitive Skills**
15 minute task group on objectives (language, perceptual skills, academic or pre-academics)
15 minute choice time: featuring individual work on objectives—
puzzles
work-job activities (sorting, matching, naming games)
or group activities
listening to records
stories

(At least part of this period should be free-time or choice-time for child.)

**10:15-10:30 a.m.** **Juice-Time-Cleanup**
Language skills—manners
Social skills—waiting turn
Motor skills—use of cup, utensils

**10:30-11:00 a.m.** **Sensory-motor Skills**
(indoors or outdoors)
10-15 minute task on objective (individual or small group)
Gross Motor—mobility activities: crawling, walking, running, balance beam, pedal toys, climbing
Coordination—ball playing, large building blocks, bean bags
Rhythm activities
Fine Motor—playdough, clay, sand, cornmeal or sawdust play blocks, puzzles, pegboards, scissors, coloring, painting
15 minute—choice time featuring above activities

**11:00-11:30 a.m.** **Floating Period**—low-key group oriented period, may involve music projects, special events, or experiences

**11:30-11:45 a.m.** **Departure**—dressing, farewells

This particular schedule shows 45 minutes of concentrated formal instruction to a child per day. A great deal of significant learning also occurs as adults attend to the progress and interests of the child. Giving words of encouragement, sharing a child's feelings of success, and using other naturally reinforcing events in the environment can enhance the child's learning experiences as s/he interacts with the materials, activities, and resources available in the classroom. For a child who is receiving direct language instruction, a teacher may require a specific verbal request before pouring the child's juice or giving a cookie at snack time. A child who is disruptive might receive high praise for sitting through a whole story-time without disruption.

**Learn to use natural reinforcement by observing just what the child appears to find reinforcing.**

Capitalizing on children's interests is another way of enhancing learning experiences. For example, dressing skills may be learned through dramatic play with dolls, dress-up play with costumes such as fireman's coat and hat, cowboy's vest and hat, princess' skirt and crown. Classroom situations should provide many opportunities for practice of the skills the child is learning.

**Arrange the room so that several activities may be going at once.**

The room arrangement should be utilitarian. A room arranged around activity centers where children can have direct access to materials they can use with minimal supervision can be of great help to an individualized program. In a classroom divided into interest or learning areas, several small groups can be working simultaneously and some children may work alone for short periods of time. Periods of free-time, when children can engage in activities of their own choosing are an important part of any child's day. Such periods allow children time to pursue their own interests, make choices, learn to manage their time, and to practice independent behavior. Observing a child during free-time periods can give a teacher important clues about what is reinforcing to her; what her interests are and which activities she likes best. However, the initial experience of free-time for handicapped children may bring periods of inactivity. This may happen because the children are used to having activities done for them and materials brought to them. It might also occur because they have not always been encouraged to be active participants in the natural events of their environments. The teacher can help overcome this by initially structuring free-time, encouraging the child to pick one of two choices or presenting new options one at a time.

## Daily Evaluation

**Only through systematic evaluation of program elements can you determine what is being done wrong and what is being done right.**

Evaluation should be part of the daily routine. Time should be set aside each day to assess the progress of each child.

Objectives make the process of evaluation simpler. If your objectives are well-stated and the criterion level is clear it is an easy task to observe the child during instruction and to measure progress toward the objective or goal. When the criterion on a certain objective is met, the child is ready to go on to the next objective. If the objective is not met within a reasonable length of time, re-evaluate 1) the time given to instruction, 2) the method of instruction, and 3) the complexity of the task. You may decide to make the instructional periods longer, change the type of reinforcer, the instructional materials, or simplify the objective by reducing it to smaller steps.

The precise format of one's objectives and evaluation techniques is not as important as the fact that this cycle should become a natural way of thinking about implementing instruction for the teacher. Continual observation, assessment, and decisions about instructional programs should become a daily routine and an ongoing classroom occurrence.

Aspects of the program other than direct instruction can and should be evaluated as well. Materials can be

evaluated in terms of how often they are used and how effective they are in helping students learn. Room arrangement can be evaluated by observing in what ways areas are used and how often. The teacher may notice that the perceptual games and puzzles area is rarely used. Closer observation may show that children who sit down to play with the puzzles are quickly distracted by other children who are actively playing with wheel toys nearby. The solution may be to move the puzzles to a quieter area of the room. The total classroom atmosphere can be evaluated not only by the progress children make but also in terms of their expressed feelings and attitudes toward the school environment. Are they happy to come to school most days? Are they relaxed and easy-going in the classroom routine? Consistent behavioral or emotional problems may be clues to the teacher that changes should be made in the classroom environment or routine.

Evaluation can be somewhat informal and still effective if the following general steps are observed:

1. Define the goals, objectives, or expected outcomes.

2. Decide what evidence will be acceptable to show if the goal has been met. (How will you know if it happens?)

3. Observe systematically and record your observations.

4. Make decisions based on the evidence. (You may decide to redefine goals, gather more evidence, or make changes.)

5. After you have implemented your decision, keep observing, recording, and making changes as necessary until your goals are achieved. (Try, try again.)

For a description of more formal methods for total program evaluation, see the Evaluation Section of this package.

Suggestions for working with preschoolers:

Although these suggestions apply to some degree with most preschoolers, they deserve special emphasis for those working with handicapped children.

1. Provide concrete experiences. Because of a more limited exposure to life, handicapped children are slower to pick up abstract concepts. Materials should be mainly concrete at this level, simple, and vivid. Offer experiences that are real, rather than simulated.

2. Though handicapped youngsters may need more stimulation, encouragement, and guidance, allow children to do things for themselves as much as possible:

a. guide, but don't do it for them,

b. arrange as much active participation as possible—first hand experience is very important.

3. In communicating with the child:

a. establish contact, by touch and/or voice,

b. speak to child at his eye level as much as possible,

c. establish consistent signals and response patterns, (teacher may need to teach pointing, touching, yes/no response patterns),

d. use clear and consistent language when giving instructions.

4. Promote social-emotional growth:

a. make child aware of social expectations,

b. encourage child to be a part of the group, even passively, for at least part of each day,

c. encourage sharing and responsibility—give opportunities to help in simple ways.

## Guide to Selection of Materials

**Using community resources to help build a materials collection will also strengthen community involvement and support.**

The materials and toys you choose for your preschool should meet three basic criteria:

1. They should fit into the program format rather than causing the program to be built around them.

2. They should have several uses. Multipurpose toys encourage imaginative play and are cost-beneficial.

3. They should be inexpensive and creative. Many toys can be made very easily by volunteers and these are often more creative and usable than commercial toys.

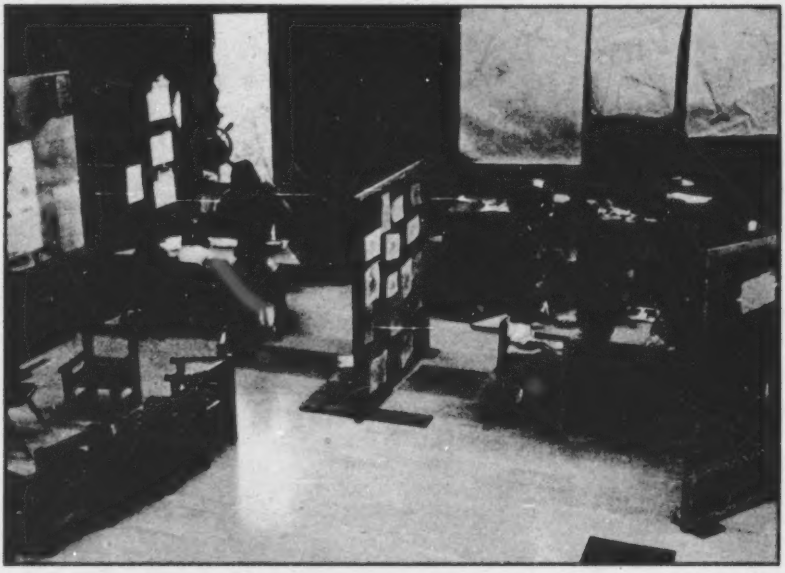
Finding volunteers to make toys should not be terribly difficult. Parents are a good source to contact first—their talents will be many and varied. Community service clubs are available and anxious to be used for making such things as wooden toys and play equipment. Retirement homes often have individuals who can make cuddly toys and you can be sure they will be constructed with loving care. Other resources are high school art classes or social clubs, Future Teachers of America, Future Farmers of America, 4-H Clubs, and Scouts. These young people are a unique talent pool and may offer a range of skills and time for crafting materials which you specify. Keep in mind that it is good public relations to involve the community in your preschool. The more they are involved, the more they will feel that it is really their school, and the more support they will be willing to lend.

If you are purchasing materials, publishers and educational houses can supply you with free colorful catalogues. These catalogues will show the latest in imaginative materials and will include dimensions and cost of the item.

Select toys and materials which correspond to the needs of your program and the children who are a part of it. Select them also on the basis of size, texture, graspability, and any other criteria you determine. Something to remember is that each year new lines are produced and last year's display items are sold at reduced prices or even given away. Be sure to avail yourself of such offers.

One final note: if you or a parent or volunteer should come up with an idea for a unique educational toy or material, arrange to have a district sales representative know of it. The royalties you receive from it just might help fund your program.

**Imagination is free . . . it may even pay off!**



Chapter Five

# Staffing a Preschool Program

The moral responsibility of educators to assure children the educational advantages which are rightfully theirs is critical at the preschool level. An effective educational experience for the very young child, particularly the handicapped or high risk child, can help her or him through the potentially difficult first few grades. It can help to promote the process of mainstreaming, and it may allay anxieties which many children feel upon starting school in first grade. It is essential, then, that preschool administrators recognize the importance of staffing their schools with people who are equipped with the skills to enhance the early learning experiences of the preschool child.

**Student-teacher ratios must be kept low**

Determining the number of teachers to hire, along with desired qualifications, should be an early decision. Numbers of children and numbers of teachers are inter-dependent. There should be one teacher or aide for 3-5 children—so, the number of students you will be able to admit into a program depends upon the number of teachers you have money to hire.

**Salaries should be comparable to those offered by local public schools**

An important factor to consider in an attempt to attract well-qualified personnel is the salary scale with which you are working. A preschool program should offer salary schedules, fringe benefits, and tenure rights which are equal to those being offered by public schools in the dis-

trict. If salaries are lower, the price will be lesser competencies. In the case of a preschool for handicapped children, the quality of educational experience which the students will receive from well-trained teachers simply cannot be sacrificed. Comparative salaries should be paid to aides also, and theirs should be considered responsible positions. In general, it can be said that the salary scale you choose will determine the options open to you; if you are willing to pay your teachers well, much can be demanded and expected of them; if not, you may have to be willing to expect less.

**Determining standards for professionals**

As we have emphasized previously, desired qualifications for the professionals who will be teaching young handicapped children should be very high. You may wish to adopt or modify for your own use the standards set by a state which has certification requirements both for teachers for handicapped children and for early childhood education. Wisconsin, for example, has set the following standards:

for **Nursery-Kindergarten Certification**

For a regular three year license, the applicant must have completed and/or received:

A. A bachelor's degree

B. A recommendation for teaching at the nursery school level from a regionally or nationally accredited institution.

C. A professional education sequence of at least 26 semester hours to include:

1. child growth and development
2. psychology of learning
3. methods/curriculum in early childhood education
4. 5 semester credits of student teaching, some of which must be at the nursery-kindergarten level.

for **Teachers of Handicapped Children**

For the three-year license, the applicant must have completed:

A. the general professional training requirements for teachers of handicapped children.

B. 12-18 semester credits in area of specialization, i.e., deaf, mentally retarded, vision, etc.

**Preservice and inservice training programs should be competency-**

Because of the fact that university programs in early childhood education with emphasis on children with handicaps are very scarce, preschool administrators will need to offer an individualized training program for their

staff members. The initial step in planning a training program is to establish desired competencies for administrators, teachers, aides, clerical help, and any other staff. These competencies may be based on certification standards, but they should be stated as objectives (see Curriculum section, "How to Write a Behavioral Objective"). Clearly stated objectives will perform a dual role: they will facilitate the selection of the most capable staff from available applicants; and they will give a clear idea of those competencies to build into the training program. When the staff has been hired, you will be able to match personnel competencies with the objectives and thus determine those areas in which expertise is desired but lacking in the personnel. There may be areas also in which some staff are competent and others are not. In these cases, individual staff members may assume the role of trainer for a short period of time. Objectives can also be a great help in evaluating the staff and the effectiveness of the training program. (See section on Evaluation.)

**based: determine desired competencies, then program to meet them.**

A list of areas to be covered in training personnel has been prepared by David C. Whitney for the Georgia State Comprehensive Day Care System:

1. Overall goals, objectives, policies, and structure of the comprehensive program.
2. Child care and child development programs for appropriate age groups.
3. Parent child involvement.
4. Family involvement and education.
5. Social services and counseling.
6. Health services.
7. Nutrition and food services.
8. Technical assistance.
9. Community relations.
10. Staff training.
11. Administration and supervision.

Some of the above areas may be inappropriate for your programs, some may already be covered by staff competencies, and for some of them, specialists will have to be called in (i.e., Public Health Nurses, nutritionists from County Extension Units or local universities).

**Paraprofessionals can be an invaluable resource. They, too, should be chosen carefully**

Hiring paraprofessionals to supplement your staff of administrators and certified teachers can be advantageous. A position paper from Wisconsin (Department of Public Instruction) discusses some of these advantages and delineates guidelines for the use of paraprofessionals or teacher aides. The benefits derived from using such a resource are basically twofold. First, teachers are able to carry out their responsibilities with greater expedience;

for example, the idea of individualizing instruction becomes more feasible when the teacher has needed assistance in other areas. Secondly, hiring paraprofessionals from the community creates rewarding job opportunities for many people who possess necessary skills but lack the credentials. If parents of children in the preschool are used as teacher aides, problems of financing the educational experience for their child may be somewhat alleviated, also.

The "necessary skills" required of paraprofessionals consist of competency in reading, writing, speaking, and computing; the ability to cooperate with other adults; and a demonstrated ability to work effectively with children, particularly those who are handicapped. While no specific certification or minimum formal education level need be required of aides, those applicants who give evidence of requiring minimal professional direction and guidance should be preferred over persons who seem especially dependent. Any special training required should be administered through the school's teacher training program.

The separate roles to be assumed by certified teachers and their aides should be carefully delineated. A set of guidelines is provided by the Wisconsin Department of Public Instruction which may be used as the basis of determining role relationships with allowances for modifications to suit a particular situation. It states that:

**Role of the professional**

> A professional teacher is one who, by reason of education, certification, and assignment, is responsible for: 1) diagnosing the educational needs of individual students, 2) prescribing the learning experiences which best meet students' needs, 3) evaluating pupil progress, and 4) practicing certain teaching and supervisory responsibilities consistent with good educational practice and established school policy, including the supervision of teacher's aides."

In comparison, the teacher aide is described as:

**Role of the paraprofessional**

> one who assists teachers, but assumes no professional responsibility. Since the teacher, not the aide, is accountable for the educational practice in the classroom, it is assumed that rarely would the teacher assign functions to the aide which are included in the definition of the professional teacher given above. The use of an aide is the teacher's responsibility and is ultimately based upon analysis, by the teacher, of his own professional role and in consideration of the abilities of the aide.

Possibly the most important attribute to screen applicants for and then to instill into the staff through training is a genuine respect for children and an ability to relate to them well. These qualities are emphasized in the Georgia Comprehensive Day Care System. During their training

program "trainees are evaluated on their ability to relate directly to a child or a group of children with warmth, patience, and understanding, and with appreciation for what is happening to a child in a group of children at any moment. (Is the child tired? Does he feel pain or unusual irritation? Does the child need a warming hug—right now?)." Regarding respect for children as individuals, the trainer watches for the ability to "work with a child or a group of children with respect for whatever might be their unique patterns of growth and without making judgments as to who is the 'best' or the 'worst'."

Chapter Six

# Family Programs

**With a clear understanding of their child's handicap, together with some basic techniques for teaching skills, families can supplement the hours spent in preschool by making the home a stimulating environment**

The importance of family involvement in any educational program for handicapped children can hardly be stressed too strongly. The need is especially crucial in the case of preschoolers because of the effect which the home environment has upon young children. It is widely accepted that children accumulate an extremely high percentage of total lifetime learning before the age of five. This fact coupled with the amount of time spent in the home indicates that the family and home will be the most influential factors in determining a child's behavior patterns, his or her accumulation of knowledge, social adjustment, communication skills, and so on. It becomes obvious, then, that if the goal of a preschool program is to guide a handicapped child's skill development and emotional growth, most efforts will be limited unless that child's parents are active and skilled participants. Success in enlisting family participation may be contingent upon a clear understanding of the needs, particularly emotional, of family members. Before listing and describing the general steps which are seen as necessary in operating an effective program for parents of handicapped children, we will focus briefly upon the specific factors which educators must continually consider in developing such a program.

**Parents often have emotional needs which must be met with understanding and concern**

The problems of parenthood are numerous. Being the parent of a normal child can be challenging and frustrating for the most well prepared adult. Finding oneself in the unexpected role of parent to a handicapped child—a role which parents are seldom prepared for—can be

frightening and discouraging. The emotional needs of an adult adjusting to such a role are as multitudinous as the physical needs of a handicapped child adjusting to a "normal" world. Problems inherent in parenthood are heightened and multiplied when the child is exceptional in some way. Parents are forced to find some way to deal with potential guilt feelings, the additional strains placed upon the marriage and the more sophisticated competencies required for teaching their child. A parent program should give consideration to needs which reach beyond the primary function of providing parents with basic skills to carry on the educational program outside the classroom. Families should first be brought to a level, through counseling and encouragement, at which they are able adequately to relate to the needs of their child and then given the skills with which to functionally meet those needs.

**Families also need realistic guidance in understanding and working with their handicapped child**

Specific needs may vary from parent to parent, but most of them need reassurance (and sometimes proof) that their task is not impossible and that others have dealt successfully with similar situations. A very important issue for all parents is the desire to know just exactly what their child's competencies are. Parents of handicapped children will ask, "What skills will my child need to function and participate in life; which skills does s/he have now, which will s/he need to acquire; will s/he be able to acquire the needed competencies; what will a preschool do to further his/her growth; what will I as a parent be expected to do to participate in my child's learning process; how can I tell whether my child is growing?" Answers to these questions must be as specific as possible. Parents must not be led to believe that their children will make giant leaps of improvement if in fact that is not the case. Educators must answer questions in a manner which will give parents hope plus a realistic and concrete direction for helping their child acquire the skills necessary for living a happy and productive life.

The dual nature of parental needs has been treated in some detail in the article "Changing Role Perceptions for Parents of Handicapped Children," by Meadow and Meadow. The authors have identified two need areas: one pertaining to a parent's developing actual skills which can be used to help their child function better, and the other relating to learning to cope with all of the mental strains which will be placed upon the parent—feelings of rejection, inadequacy, guilt. It is their contention that a parent will not be able to function well in the skill area unless the emotional problems have been dealt with, and vice versa. The authors stress the necessity for adequate socialization to their roles as parents of handicapped children, and sug-

gest that a "parent counselor must deal with both the instrumental or technical and the expressive or emotional components of parent roles if he is to be successful in gaining cooperation and in contributing to the socialization process." (p. 22)

In planning a parent program within a preschool setting, there are many factors which need to be taken into consideration. The purpose which underlies all of the decisions to be made—giving parents a clear understanding of their child's needs and capabilities and helping them efficiently help their child—must be remembered and reviewed continually to assure that the steps which are taken are steps toward meeting this goal. The following outline describes the basic steps necessary in developing an effective program for families of handicapped children.

**1. Find a suitable leader(s) for the program . . .**

a. special educator

b. paraprofessional

c. parent of a handicapped child

d. combination of the above

**2. Determine, with parents, the most desirable schedule . . .**

a. home visits

b. evening meetings

c. workshop—volunteer program

**3. Acquaint parents with program format, purpose . . .**

a. clarify any misunderstandings they may have about handicaps

b. detail the elements of the program—encourage participation

**4. Involve parents in administration of the program . . .**

a. planning and policy making

b. dissemination of information about program

c. assisting in administration and evaluation of program

d. working as teacher's assistant, team teacher

**5. Teach parents necessary skills . . .**

a. explain techniques to be used—behavioral objectives, reinforcement

b. outline areas in which parents are to work—self-help skills, academic, fine motor skills

c. teacher and parent determine specific goals for each child for the year

d. set up schedule for parent to review techniques, discuss progress, view films, determine direction of future endeavors.

**1. Find a suitable leader for the program**

To use Meadow's terminology, the professional special educator's defined function is in the "instrumental" realm —that is, in working with parents, the professional's task is seen in terms of motivating "parents to work hard for their child's future technical competence." While this is a desirable and necessary goal, many parents will find themselves frustrated and discouraged because their psychological needs have not been met and they are incapable of progressing beyond the limits which their emotional needs have set. An administrator of a parent program must have a good understanding of and competency in dealing with the expressive needs of the parents, and "be able to recognize the limits of their competency in meeting parents' emotional needs." Including a trained counselor on staff or making provisions to coordinate services with psychiatric or psychological resources in the community for parents with acute emotional problems is cruciai.

Paraprofessionals should be considered for working with parents. While a professional should be available for consultation, a capable, well-chosen paraprofessional may be easier for a parent to identify with in one way or another, possibly in terms of ethnic gackground or social status. He or she may actually encounter less resistance from parents, thus more effectively dealing with the emotional problems, and moving into the technical aspects of the program more rapidly. The paraprofessional may also be more sensitive in or out of the home to choosing tasks which parents feel are relevant to them and comfortable for them to work with.

Parents of handicapped children who have been well trained through a parent education program are extremely valuable members of the parent education team. The obvious advantage here is support which parents gain through working with someone who has experienced the same problems. A possible situation using "old" parents of handicapped children as socialization agents, which is suggested by Meadow, is providing contacts between "old" and "new" parents of handicapped children in sessions where a professional therapist is present to "moderate." There, the presence of parents and professionals would provide an initial and ongoing bridge for new "parents who may be generally suspicious of, frightened by, or uncomfortable with professionals . . . ." (p. 23)

Regardless of who is chosen to lead the parent program, they should be well trained in dealing with families who have handicapped children. Assistance in training teachers to conduct effective parent training sessions may be available from the Parent Training Specialists in local mental health programs.

**2. Determine the most desirable schedule for parents**

As was stated previously, we would encourage mandatory participation on the part of parents as a prerequisite to enrolling a child in school. It would be wise, also, to plan an individual meeting initially, in their home or at the school, in which the program is explained to the entire family, if possible, and at the same time, the family's needs are assessed according to level of understanding with regard to the child's handicap, possible emotional barriers, and so on. This meeting might also provide an excellent opportunity for determining parents' preferences as to when the parent education meetings will be held, how they will be conducted, and what the content will be.

Home visits, of course, require a substantial amount of staff time, so if it is felt that parents will benefit more from home visitation, such a program might well be integrated with regularly scheduled evening meetings. The advantages of evening meetings are that parents as well as other family members can work together in groups, and more volunteer help can be utilized.

**3. Acquaint parents with program format and purpose**

An initial session should be planned to include all of the parents and as many other family members as possible, in which a very clear and detailed description of the preschool program is presented. This presentation should be prepared in such a manner that parents will be instilled with a feeling of confidence and trust in the staff and in the program itself. Adequate time for questions and discussion should be allotted so that misconceptions will be cleared up and parents can feel as though their opinions are important and desirable. Though family participation should be encouraged, care must be given to making expectations sound reasonable. If the parents are overwhelmed with a barrage of new inputs at the first meeting, they may feel frightened and inadequate and eventually withdraw completely.

**4. Involve parents in the administration of the program**

Probably the most desirable method of involving parents in their child's activities is to establish a volunteer program in which parents can be used in areas where they feel the most confidence and expertise. Donald Calvert, in "Dimensions of Family Involvement in Early Childhood Education" suggests numerous roles which parents can successfully assume in a preschool—thus benefitting the school and themselves jointly. The most common roles for parents to assume are those of teacher's aide or assistant, or some form of actually working with children. Some of the more unusual jobs which Calvert feels parents might successfully handle are in the areas of planning and policy making, disseminating information about the program, and assisting in the administration

and evaluation of the program. He suggests that family members may be more successful in public relations work than a professional would be; they may well have higher credibility in terms of fund raising activities or lobbying for improved legislation. Any skills which parents have, such as building or woodworking, should be put to use. Using the abilities which parents have to offer to the greatest possible advantage will benefit both the school and the parent.

**5. Teach parents the skills they need to teach their children**

A program should be initiated through which parents can be equipped with the skills to continue their child's learning while s/he is away from school. Such a program, when run effectively, not only assures that the child is acquiring needed skills, but demonstrates to parents that what they do as teachers can help their child to be a happy and functioning individual. The new and rewarding parent-child relationship which should result can be a shift from one of frustration and despair, and the mutual growth and excitement which they will experience should serve as a reinforcer for parental efforts.

A workshop should be conducted for parents in which they are explained the techniques to be used and acquainted with materials which are available to them. The skill areas in which they are to be working should be explained in detail and a daily or weekly work schedule constructed. It would be profitable to have parents working with their children while they are in school, so the parents can be given proper guidance. As they become more skillful, their presence in the school can supplement the regular staff, and provide the children with needed individualized instruction (Benson and Ross).

A schedule of regular reappraisal and review should be established in which parents and teachers discuss student progress, possibilities for alteration of existing programs, and ideas for instituting new programs. Parent skills can also be refined and increased through films and training sessions. With a better understanding of the "special" member of their family, family members can more successfully direct their energies into providing a happy and stimulating growing experience for themselves and their child.

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Chapter Seven

# Facilities

**There are many possibilities in the community for renovating an existing structure.**

The most practical—and most likely—prospect for a preschool facility for handicapped children will be the use of an existing structure. While building a structure to one's own specifications may be desirable, there will not be many programs with those kinds of funds. There is a great deal which can be done with an already existing facility, though, provided certain specifications are followed and as many architectural barriers are removed as possible. The suggestions made in this chapter will refer specifically to the renovation or remodelling of an old structure, although most will be applicable to the construction of a new early childhood education center as well. Some of the books referenced at the end of the chapter will provide more specific guidelines to planning a new facility.

The first step should be a careful assessment of available existing facilities in the community. In looking around at the various structures, consider the following factors:

1. It must meet the minimum standards required by local licensing and regulatory bodies.

2. It should be accessible from the outside—either at ground level, with elevator service, or with adequate ramps.

3. There should be a reasonably adjacent outdoor play area.

4. It should be located fairly close to the individuals it is serving. Regardless of what arrangements are made for transportation, this still will remain a difficult and costly problem. Furthermore, handicapped children should not be subjected to lengthy and tiring travel, particularly if they are to be expected to respond to program stimuli.

5. Hopefully, it will be inexpensive.

6. It should be of such nature and location that the program and the sponsoring agency will have community visibility. This is important from the standpoint of educating the public for fund raising and to remind the community of its responsibility for children and adults with disabilities.

**"Normalization" and "mainstreaming" are important considerations even in planning a facility.**

Elementary classrooms are possibilities for use as a preschool facility and are particularly advantageous because of their proximity to classrooms with "normal" children. The concept of normalization is greatly strengthened when handicapped children are exposed to non-handicapped children and are encouraged to participate in activities with them. Other possible locations might be churches, community centers, health department buildings, fraternal organizations, and converted private dwellings.

In creating the environment with which the staff and children in the program will live for several hours each day, it is important that the administrators and architects plan according to objectives and criteria from other program elements. Each phase of the total planning effort consists of a group of options from which to choose. The chosen criteria will dictate the needs of the physical area as well.

**Plan to criteria—it can't be said too often!**

Begin planning an early childhood center by carefully considering objectives from every program element. An assessment of these objectives as they relate to a facility will help in developing a set of criteria for that facility. Program areas to consider are: community needs assessment, children's needs, curriculum and materials, available funds, family/community involvement, and staffing.

**Needs should be accurately assessed before the initial planning stages.**

The results of the community needs assessment will determine how large the facility must be in order to house the number of children identified as needing services. It will also pinpoint any special architectural considerations to be made for specific handicaps.

**Money can only go so far . . . first things first.**

The amount of money allotted for the program will define the restraints imposed upon filling the needs indicated in the needs assessment. Here the importance of objectives becomes apparent. For example, a given amount of dollars may be able to pay for the construction of a new facility, but choosing that alternative may preclude purchasing the needed instructional materials, outdoor play equipment, and so on. Obviously, one or the other of the choices must take precedence.

**The chosen curriculum model will say a lot about room arrangement, and so on.**

The methodology of the chosen curriculum, along with the kinds of materials to be purchased or made, will play a large role in the choice of room size, arrangement of furnishings, dividers, and so on.

**Offices for staff . . .**

Number of offices, design and size of staff room, recreactional facilities for personnel—these are all decisions which will have to be made with regard to the staff. If in-service training, as well as pre-service training for teachers, will be a part of the program, adequate facilities must be provided.

**Space for parents and visitors . . .**

Space for parents and other visitors is another important consideration. They should be provided with a meeting room for parent education, community information sessions, and other meetings, as well as small rooms for private conferences between parents and teachers. A library might be incorporated into the meeting room and equipped with informative materials of interest to parents of exceptional children.

**Develop a sequence of events which corresponds to your chosen criteria.**

When criteria have been established and prioritized, use them as guidelines in planning. A traditional course which the planning of an educational facility has taken is outlined here. It is a list, suggested by architects, of the steps involved in building a new facility, although it might easily be modified to be used in planning a facility from an existing structure:

1. **Master Plan**—An attempt to project needs for educational services and means of providing them on a community basis. Includes survey of existing facilities, financing proposals, and site considerations.
2. **Educational Specification**—The philosophical statement including educational approach and curriculum for the school. Includes staff organization and student population.

3. **Architectural Program**—The statement of space needs, environmental needs, environmental criteria, and philosophical approach to the architectural solution.

4. **Facility Design**—Schematic representation in drawings and models of the facility design based on the architectural program.

5. **Contract Documents**—Legal description of the proposed building in drawings and specifications.

6. **Bidding**—Securing of construction bids and selection of a contractor.

7. **Construction**—Actual construction of the facility with supervision of the architect.

8. **Evaluation**—Evaluation by architect and client of building performance. Includes any modifications necessary on a continuing basis.*

## Environmental Variables

**Planners should be aware of the effects which the environment can have on exceptional children.**

While the preceding outline delineates the basic steps necessary in planning a facility, there are also certain concepts which should be considered together with decision-making. These concepts are a part of the environment which surrounds each one of us. The more sophisticated our understanding of the psychological effects of such things as color or shape, the better we can control their impact upon us and those around us. With handicapped children, the impact of an "environmental variable" is often more intense, less meaningful, or different in some way from its usual effect. Some of these conceptualizations and their varied effects will be discussed in this section. The material is adapted from *Role of the Physical Environment in the Education of Children with Learning Disabilities*, by Bednar and Haviland. It is a very informative and useful book for special educators and architects involved in special education.

**Color:** It is recognized that color affects people psychologically and that different people prefer different kinds of colors. Usually children and outgoing, aggressive types of people choose warm colors such as red or orange, while older or withdrawn, shy people prefer cool colors as blue and green. Red is dynamic, "raises blood pressure and pulse rate . . . , it is exciting and it increases restlessness and nervous tension." "Green is pacific and tends to reduce nervous and muscular tension." Blue has an effect which is opposite to that of red—it "lowers blood pressure and pulse rate" and is "low in attention-value, sedate and restful."

* From Bednar and Haviland.

In determining color choices for an early childhood center, it is suggested that color be related to the activity which will be happening in the room. An example would be using red in a place where creative ideas emerge and then green where they will be carried out. To give children a sense of identity, and also to begin acquainting them with the concept of color, they might be allowed to choose colors of some objects which relate directly to themselves, such as coat hooks, cupboard doors, or chairs.

**Sound**: Sound can be used to shape an environment as can color. In a room, for instance, where quiet activities take place, the sound level should be kept to a minimum. Exceptional children may have a more difficult time adapting to distracting noises, so acoustics should be carefully thought out.

**Space-Time**: Just as a poorly designed physical environment can do a great deal to reinforce an already distorted sense of time, something handicapped children may have, it would seem that a well-planned environment could help ameliorate the problem and establish accurate space-time identity. Some suggestions for orienting a child to the concept of time are:

- ☐ Using calendars with seasonal pictures, clocks with colored discs, and growing plants to make time more real.
- ☐ Providing mirrors and possibly other devices to reinforce a child's body image and to relate his actual physical movement to his feeling that he is indeed moving through space.
- ☐ Laying out his daily paths so he remains "oriented" both inside and outside the building. He should always be given some sense of where-he-is-going.

**Ambiguity-Consistency**: Just as an exceptional child's daily activities in a preschool should maintain a fairly high level of consistency, his/her environment must also provide security by remaining consistent. Ambiguity may be avoided and consistency reinforced by keeping in mind such measures as "careful consideration of changes in the environment such as furniture rearrangement, paint color changes, space use alteration, and shifts in lighting level and quality. These changes should not be made suddenly 'over the weekend'."

**Useability**: This concept relates directly to the next section in this chapter—Architectural Barriers. While humans generally have a fairly high tolerance to problems and barriers in our environment, handicapped children may exhibit a lower tolerance to such frustrations. These frustrations should be avoided to the greatest possible extent. Cues for the architect and builder are included in the following section.

## Removing Architectural Barriers

**Communities generally need help in raising their consciousness to the plight of people who are at the mercy of architectural barriers.**

The information found in this section is quite inclusive. In fact, attempting to meet every specification listed in the outline would be prohibitive for nearly any project. These criteria are desirable for every public building, but until the community is educated to the special needs of handicapped children and adults, the handicapped will have to make adjustments. For that reason, it is not expected that each of these specifications be met; rather that the children in a preschool are exposed to facilities as they will be for most of their lives. Special ramps, doors, toilets are needed for wheelchair bound students, but these facilities should closely parallel those most often found in the home and community.

The following guidelines are included as an ideal. Some of them may apply to your particular program. They might also be used effectively in a campaign to educate the community to the concept of architectural barriers.

**A. Site development**

1. Pedestrian walks—48″ wide, gradient 5% max., common surface( no abrupt changes), non-skid surface, adequate lighting.

2. Ramps—nonskid surface, 1′:12′ slope recommended with rest platform every 20′. 1′:10′ slope—rest platform every 12′. 1′:8′—handrails and rest platforms every 12′ imperative. Handrails 32″ high on both sides extending 18″ either end; platform at top 5′ x 5′ min., platform at bottom 6′ min.

3. Parking—near building entrance, 1 in 50 marked for disabled, spaces 12′ wide, access to sidewalk (no curb, with 30″ min. space between wheel stops).

4. Curbs—should not be eliminated as they orient the blind; prefer change in texture before curb to warn blind, then ramp to street (ramp off to one side o.k.) curb cut non-slip surface, 1′:6′ max. slope, min. 3′ width.

**B. Public Buildings**—In addition to above specifications, three basic rules: accessible entrance, all levels accessible, and usable restrooms.

1. Doors and entries—min. 32″ wide, ground level or ramped, 5′ level clearance both sides (6′6″ between inner and outer doors), doorsill flush with floor, hinged non-revolving doors, level handles rather than round knobs for those with poor grip, metal bar before glass door for poorly sighted, no turnstiles.

2. Stairs and Elevators

Stairs—riser 7″ max., tread 11″ min., no projecting nosings on risers, non-skid tread, contrast color nosing, good lighting, handrails 32″ high extending 18″ either end, variation in floor texture before stairs to warn blind.

Elevators—level with landings, handrails, hold button for door, control panel 36" from floor, raised figures on buttons for blind, sensing device so doors won't close, spacious enough for 180° turn in wheelchair.

3. Bathrooms—at least one stall that is: 36" wide x 60" deep, door swings out and closes by itself, handrails 33" high on both sides, toilet seat 19" from floor with understructure that receeds sharply; or stall sufficiently wide (52"), with toilet seat to one side, to allow lateral transfer.

Sinks that allow wheelchair clearance (narrow apron, no cabinets below), with drain and hot water pipes insulated, 26" height, 24" width, 12" depth. Mirrors, shelves, towel and soap dispensers within reach of person in wheelchair (40" max. to bottom of mirror).

Toilets and urinals—floor mounted preferred, basin 19" max.

4. Dining Areas—min. distance table to wall 44", min. distance between tables 63", height 30", table understructure open to allow for wheelchair leg supports and/or leg braces.

5. Conveniences

Drinking fountains—protruding from wall, not built-in, controls and spout near front edge, hand and foot operated, basin 36" from floor. Phones—booths wide enough for wheelchair, coin slot 40" max., hard of hearing device.

6. Identification and Warnings

Raised letters or numbers on building directory and doors for blind (place within reach at consistent height).

Doors not intended for public use (danger entry or exit) identifiable to blind by knurling on handle or knob.

Signs, lights, protruding automatic door closers, or similar objects 7'-0" min. height.

Absence of hazards, e.g., manholes, exposed electrical panels, objects protruding into circulation areas, etc.

Audible warnings and use of floor texture differences for blind.

**Maintain a receptiveness to the physical needs of the children and adults involved in your program.**

If the special physical needs of the handicapped are considered in the initial planning stages, many potential barriers can be eliminated for the mere price of planning ahead. This again is related to the necessity of planning to criteria. Prioritize the criteria according to needs, wants, and luxuries, then implement each in order of importance until funds, energy, and interest are exhausted. As the program begins, always be sensitive to changes in needs, and be flexible enough to make the necessary alterations. Young handicapped children in any program deserve an environment which will promote a healthy adjustment to a world they might otherwise find hard to live in.

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Chapter Eight

# Evaluation

**Continuous and systematic evaluation is beneficial for improving methods, giving feedback, monitoring progress, and renewing funding sources.**

Evaluation is a term frequently used in education to signify a process that is similar to quality control in manufacturing. Because our "products" are human beings, however, the evaluation of educational programs is especially important. Funding sources, in fact, almost without exception, require that specific evaluation plans be included in each proposal.

A well-thought-out evaluation plan can aid a total program by providing systematic methods of observing and monitoring progress, for gathering and organizing information, and for providing feedback to all concerned. The by-products of a systematic evaluation include more careful planning, better inter-staff communication, and more accurate feedback for better decision-making.

**Communication is a necessary component to effective evaluation.**

While in the abstact, few would disagree that evaluation is important, terms such as "evaluation" and "accountability" often produce fear of judgment and spectres of a process that is distasteful and not really related to the actual business of teaching children. For this reason communication lines between program functionaries and those responsible for evaluation should be kept open at all times. Input from all sides needs to be considered, and decisions, especially decisions about criteria and judgment standards, need to be clearly and promptly communicated to all concerned.

Listed below are the five major steps in the evaluation process which will be covered in this chapter:

- ☐ Defining Goals and Objectives
- ☐ Planning
- ☐ Data Management
- ☐ Documentation
- ☐ Feedback

## Defining Goals and Objectives

**Again, objectives play a vital role.**

The place to begin evaluation of your program is at the beginning of the project. The goals that are defined for the project in the initial planning are the most logical standards against which to evaluate the effectiveness of the program once it is implemented. The program objectives for each component of your project can serve as the evaluation objectives as well, if those objectives are specified in observable and measurable terms. For instance, one of the goals of your project may be to serve the needs of presently unserved handicapped children in your community. A more specific statement—"to provide a preschool program for at least 33% of the community's unserved handicapped between the ages of 3 and 5 years"—gives an objective which is measurable in terms of observable data gathered in a community needs assessment and from enrollment records from your program. A look at the needs assessment data may show that 33% is a figure that is unrealistic for the size of program you can manage. This is important to know too, so that a goal can be set which is within the realm of possibility to meet.

**Objectives must be measurable to provide an adequate evaluation tool.**

Other types of goals and objectives are defined in the initial phases of a project. To attend to the developmental needs of the children, teachers set criterion levels in curriculum areas that they expect children can meet. For example, 80% of the children will be able to dress themselves, except for tying shoes, by the end of the semester. Or, 80% of the children will meet individual objectives set for them in the curriculum area of motor skills development. Long range objectives for children in the program may also be set. The goal may be, "Eighty percent of the children will be successfully placed in public school programs upon entry into the first grade." This goal may also be expressed in terms of reducing community needs: "As a result of the preschool program, 25% fewer students will meet with failure in their initial placement in first grade programs." These objectives, too, can be evaluated in terms of measurable results.

An attempt should be made to consider all important aspects of your project when defining program and evalu-

tion objectives. Some other aspects to be considered beyond those of community needs reduction and attention to curriculum needs of children mentioned above might be:

- ☐ Parent participation and satisfaction
- ☐ Staff development, communication, and satisfaction
- ☐ Community involvement and support
- ☐ Cost/benefits or cost/effectiveness.

Objectives for the evaluation process itself may also be considered appropriate. Defining the parameters of the evaluation (setting the priorities of program objectives on which the evaluation is to focus), and setting deadline dates for completing various phases of the evaluation are good measures to take.

## Planning

**Identify constraints and resources inherent in your program.**

In planning to meet the objectives, it is important to consider constraints and resources which might make a difference to the character of the program. Program constraints might include the limits of your funding, facilities, personnel, and possibly constraints upon the type of program to which you may have given priority. Constraints imposed by a funding agency or by community zoning laws are other possibilities. Some resources to consider might be aid in terms of advice, time or other services from local associations for the handicapped, services from students and faculty at local colleges and universities, from federal resources such as regional Instructional Materials Centers and Regional Resource Centers for Handicapped Children, and from state resources, such as consultants and service agents.

Priorities and alternative strategies are two more necessary components of a planning phase. What is the emphasis of *your* program? Where should most of the energies and monies be directed? What alternatives are open in terms of staffing, facilities, program and curriculum, reaching parents, etc.?

The evaluation component, by the way, will have its own constraints (limited funds, time or personnel) and its own resources (some funds, some time set aside, and some expertise in personnel inside or outside the project). These also should be planned.

## Data Management

**Determine the best plan for managing data.**

Once program objectives are defined and parameters of evaluation set (priorities), methods of gathering and managing the data are chosen. Alternatives here are plentiful. There are methods of gathering data on the process

(teaching methods, internal communication, smoothness of the operation) and methods of gathering data on the "product" (criterion levels met, post-test results, success of students, continuation of financial support). There are methods of gathering formative data—information gathered as you go along which help in decisions about improving or modifying the project mid-course. There is also summative data to be gathered—the end-of-year, or end-of-project cumulation of information upon which continuance, discontinuance, or modification of funds is sometimes based.

There are also alternatives in the sophistication of the evaluation instruments that are to be used. While standardized tests are often recognized as reliable measures for certain kinds of summative results, sometimes methods as simple as tallying attendance at parent meetings, or daily charting of a child's progress in walking a balance beam are more pertinent and less cumbersome for the evaluation questions to be pursued.

The following outline lists some of the many methods of data gathering that might be appropriate to a preschool program:

**I. Progress of children**

A. Formative:

1. Measure progress toward objectives daily (i.e., precision teaching).

2. Observe children and keep a log or anecdotal record of behavior. Compare progress over time.

B. Summative:

1. Compare results from criterion-referenced pre- and post-tests.

2. Compare results on standardized tests given at beginning of the year and at the end of the year.

C. Long range: keep track of child and his/her success or failure after s/he enters public school.

**II. Parent participation and satisfaction**

A. Keep a record of attendance at meetings, or record of contacts with the school by phone or in person.

B. Keep records of how many parents are involved in volunteer activities with program; how many actively involve themselves in decision-making opportunities.

C. Keep track of progress in dealing with child at home (fewer calls for help, expressed improvement, noticeable improvements to staff).

D. Survey expressed attitudes of interest in child's program, satisfaction with program, attitudes toward task of parenthood.

**III. Staff development and satisfaction**

A. Measure increased ability to handle classroom difficulties (fewer calls for help, observation of a smooth running program, expressed ability by teacher).

B. Keep track of new ideas implemented in classrooms as a measure of willingness to improve, and as an indicator of positive morale.

C. Accept gains and deficiencies in students as possibly reflective of teacher success or failure.

D. Survey attitudes of teachers regarding satisfaction with program and suggestions for improvement.

**IV. Community involvement and support**

A. Keep track of favorable and unfavorable publicity as a weathervane of community support.

B. Donations of time and money are indications of community feelings.

C. Willingness to provide continuing support (financial, and otherwise) is probably the most important indication of community feeling.

**V. Community needs reduction**

A. Compare records of direct services with previous needs assessment information.

B. Measure "fallout" effect, i.e., other programs started or improved because of inspiration from your program.

**VI. Cost/benefits, cost/effectiveness**

A. List services rendered vs. costs.

B. Compare list with expected results from alternative uses of funds.

C. Compare list with results of similar projects.

Before the program gets under way, routines will need to be developed for gathering, storing, processing, and interpreting program data. Decisions that need to be made include determining whether computation instruments such as a calculator (or possibly access to a computer) will be needed; and determining whether the statistical analysis will be done by a staff person or whether it will require outside, possibly expert, help. Reliable data, of course, need not be that complicated.

## Documentation

Program documentation includes the collection of periodic and routine data as called for by the data management plan, the preparation of interim and incidental reports, and the summation and interpretation of data for year-end and/or final program reports.

**Systematic documentation of program elements will greatly simplify report writing.**

Making schedules of routine and periodic observations, visitations, etc., and sticking as closely as possible to es-

tablished timelines are often critical aspects of effective documentation. Much of the information to be gathered cannot be postponed a week or month without damaging its reliability.

While, in general, paper work should be kept to a minimum, simple forms relevant to evaluation objectives can help keep input simple and consistent. These data can provide feedback that may help head off troubles or reinforce strengths in the program. For instance, if you find that after the second week, only a few parents are showing up at parents' meetings, perhaps a new approach should be taken then. On the other hand, if you can document that all children who were previously unable to feed themselves can now do so, the instructional approach for that objective might be generalized to other related skills.

A final proviso: allow for unexpected results and variables that had not been anticipated. After all, evaluation is not performed in the sterile setting that classical research occupies. Sometimes the unexpected variables and occurrences carry a good deal of weight when the overall results of the data are considered.

## Feedback

**Information on evaluation results need not necessarily be communicated via a standard format.**

The results of data analysis must be communicated in some way. The format of the report will depend on the purpose of the documentation and to whom it is intended to communicate. Often a feeling of futility comes over the report writer who realizes that the end of the line for the document is in some bureaucrat's file drawer. Although there is a reason for such documents, their format and their purpose need not be the only type of documentation considered. There are many ways to communicate information on the results of evaluation. The method chosen depends upon whom we wish to communicate with. Do we want to report to the project staff as a sort of inhouse feedback? Are we making a report to the community for the purpose of raising consciousness and/or funds? Are we communicating with colleagues at a convention or through a trade journal? Consider these alternative formats for documenting the results of your project's evaluation:

- ☐ Speech or personal presentation (possibly supported by written outlines).
- ☐ Audio-visual presentation, slides, filmstrips, or videotape.
- ☐ Public interest pamphlet written in layman's terms.
- ☐ Journal or magazine article.
- ☐ Monograph
- ☐ Technical report

The final outcome of the evaluation process provides information upon which to base decisions. If the evaluation has been carried out well, decision making should become much easier. Not one or two, but several pieces of information showing trends in the program and suggesting future directions should be visible. Familiarity with general evaluation design can provide a useful tool, a way of thinking about programs in terms of continual feedback and improvement. Further information and training on evaluation in the field of education can be obtained from the resources listed below.

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Chapter Nine

# Documentation and Proposal Writing

**Creating a total program requires careful organization and planning**

Bringing all of the program elements together into a cohesive and functioning whole requires diligent planning and record keeping. From the beginning stages, decisions on policy and procedures should be documented so that accurate records are maintained. Records can serve as reference points when confusion arises; they can be used to explain the program to parents and interested members of the community; and, perhaps most importantly, they will become invaluable at proposal writing time. If a proposal is to be written, contact several funding sources early to determine their basic requirements for submitted proposals.

The chapters in this guidebook outline the basic steps necessary in planning a preschool program for handicapped children, though each program will have its own idiosyncracies, and sequential variations must necessarily be made for each. Following are some suggestions for using the chapters in this book to arrive at a plan for a program which is individualized, well documented, and able to sell itself to the community and possible funding agencies.

**A convincing rationale can help justify a program's existence**

The section in the introductory chapter which provides a rationale for early childhood education for the handicapped may be condensed into a few capsule statements which reflect your particular program's emphasis. Program philosophy must be agreed upon early in the planning phase for it will determine directions to take in many instances of indecision. A philosophy is not spelled

out in this book, though important concepts relating to early childhood education are to be found in nearly every chapter. In making a statement of philosophy for your program, consider such things as: curriculum approach, staff qualifications, degree of family involvement, kinds of instructional materials, and so on. A clear and precise philosophical statement will be necessary if a proposal is to be written, because most funding agencies require a justification of the administrative approach to the program.

**Data from an identification campaign will reveal where a need exists**

It was emphasized repeatedly in the Needs Assessment chapter that without evidence of a true *need* for the kind of program you hope to initiate, the best planning effort in the world will be wasted. This has been substantiated by funding sources who indicate that the most important consideration in awarding grants is whether a genuine need for the program has been shown to exist. In conducting your identification campaign, then, keep careful records of children screened or tested in any way, and any agencies surveyed. Also, be sure to document tests, test administrators, medical examinations, procedures, and any other important elements of the screening procedure.

**Budgets are necessary for many reasons**

Keep an accurate and current budget. In a proposal, each program element must correspond to a budget item. Poor planning in fiscal matters can make this a difficult task, as well as cause many frustrating and needless problems as the program begins to function.

**Record curriculum objectives**

"Planning to objectives" has been another emphatically stressed concept throughout this book and it is a concept which applies to nearly every program element, particularly the curriculum. Creating a curriculum plan suitable for the teachers as well as each child in the program will be a challenge. As you begin to identify academic and non-academic areas upon which to concentrate, state goals, long- and short-range, and record them. Having curriculum goals and objectives in writing will be helpful in many ways: talking to parents, assessing child progress, or writing a proposal. Keep confidential files on the children in the program from the time they are screened. Also, obtain as much information as possible from other agencies which may have provided diagnosis or treatment.

**Document creativity too**

Maintain files on the families of children in the program, too. Document your parent program. This is an area in which innovative ideas may emerge and, with care, these ideas may be used in later years or even passed on to other programs for replication.

**Make sure the facility is compatible with the program plan**

There will be advantages and disadvantages inherent in the facility housing your program. List both and then attempt to compensate for the disadvantages. Some problems can be solved by volunteer builders, some by improvisation, and some by locating sites in the community to which you might transport some or all of the children in the program one day a week, or less often. Examples of the latter might be, a nearby park for physical education, or a hospital for physical therapy. Disadvantages may be in the area of meeting county or state requirements for public buildings. These problems will have to be attended to and solutions delineated well before the program begins.

**Evaluation assures appropriate adjustments**

Documenting each stage of planning provides needed criteria for evaluation. Throughout the program term, results can be compared with expectations. When results are not compatible with the goals set in the beginning, changes must be made in methodology or strategy, or else the goals must be revised.

If accurate records are kept and the program remains well organized, many problems can be avoided, or at least greatly diminished. Proposal writing will be much simplified and you will be equipped with a document which should answer most of the questions a parent or funding agent might ask.